

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000001719

**Entity Name:** MAGNOLIA VILLAGE LLC

**Current Principal Place of Business:**

1013 NORTH EAST 14TH STREET  
OCALA, FL 34470

**Current Mailing Address:**

PO BOX 966  
WEST END, NC 27376 US

**FEI Number:** 20-2121830

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SHARKEY, JAMES PAUL  
1013 NORTH EAST 14TH STREET  
OCALA, FL 34470 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** JAMES P SHARKEY

04/13/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGM
Name	SHARKEY, JAMES	Name	SHARKEY, JAMES PAUL
Address	1013 NORTH EAST 14TH STREET	Address	PO BOX 966
City-State-Zip:	OCALA FL 34470	City-State-Zip:	WEST END NC 27376

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JAMES P SHARKEY

MGM

04/13/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date