2017 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:

MOLFETTA, MONIQUE 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: MONIQUE MOLFETTA 05/05/2017

Electronic Signature of Registered Agent

Date

FILED May 05, 2017

Secretary of State

CC5847552981

Authorized Person(s) Detail:

Title MGRM Title MGM

Name SHARKEY, JAMES Name MOLFETTA, MONIQUE

Address 1013 NORTH EAST 14TH STREET Address PO BOX 304

City-State-Zip: OCALA FL 34470 City-State-Zip: CALVERTON NY 11933

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: MONIQUE MOLFETTA