

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000003765

**Entity Name:** TERI MICHELLE JONES, P.L.

**Current Principal Place of Business:**

830-13 A1A NORTH #501  
PONTE VEDRA BEACH, FL 32082

**Current Mailing Address:**

P. O. BOX 9916  
CHESAPEAKE, VA 23321

**FEI Number:** 20-4171798

**Certificate of Status Desired:** No

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

JONES, TERI M ESQ.  
830-13 A1A NORTH #501  
PONTE VEDRA BEACH, FL 32082 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:** TERI M JONES

03/16/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name JONES, TERI M ESQ.  
Address P. O. BOX 9916  
City-State-Zip: CHESAPEAKE VA 23321

*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:** TERI M JONES

MGRM

03/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date