

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000020803

**Entity Name:** ANTHONY CHAVERS ENTERPRISES, LLC

**Current Principal Place of Business:**

5724 WHISPERING WOODS DR.  
PACE, FL 32571

**Current Mailing Address:**

5724 WHISPERING WOODS DR.  
PACE, FL 32571 US

**FEI Number:** 20-4391772

**Certificate of Status Desired:** No

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

CHAVERS, ANTHONY J  
5724 WHISPERING WOODS DR.  
PACE, FL 32571 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name CHAVERS, ANTHONY J  
Address 5724 WHISPERING WOODS AVE  
City-State-Zip: PACE FL 32571

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANTHONY CHAVERS

MGR

04/10/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date