# 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000067978

Entity Name: J. D. WILLIS, LLC

### Current Principal Place of Business:

4557 S US HWY 441 LAKE CITY, FL 32025

# **Current Mailing Address:**

POST OFFICE BOX 1546 LAKE CITY, FL 32056 US

## FEI Number: 20-5150550

# Name and Address of Current Registered Agent:

WILLIS, JOHN D 4557 S US HWY 441 LAKE CITY, FL 32025 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

# Authorized Person(s) Detail :

| Title           | MGRM                       | Title           | LIMITED MEMBER       |
|-----------------|----------------------------|-----------------|----------------------|
| Name            | WILLIS, JOHN D             | Name            | WILLIS, BETHANY G    |
| Address         | POST OFFICE BOX 1546       | Address         | POST OFFICE BOX 1546 |
| City-State-Zip: | LAKE CITY FL 32056         | City-State-Zip: | LAKE CITY FL 32056   |
|                 |                            |                 |                      |
|                 |                            |                 |                      |
| Title           | LIMITED MEMBER             |                 |                      |
| Title<br>Name   | LIMITED MEMBER<br>JW 3 LLC |                 |                      |
|                 |                            |                 |                      |
| Name<br>Address | JW 3 LLC                   |                 |                      |

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: JOHN D WILLIS

AGENT

Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 26, 2017 Secretary of State CC9721956765

Certificate of Status Desired: No