

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000120685

**Entity Name:** S & S LAND COMPANY, LLC

**Current Principal Place of Business:**

315 AVE A  
FORT PIERCE, FL 34950

**Current Mailing Address:**

PO BOX 3688  
FORT PIERCE, FL 34948

**FEI Number:** 20-8440598

**Certificate of Status Desired:** No

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

CAVALCANTI, GLYNDA W  
315 AVE A  
FORT PIERCE, FL 34950 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 VP  
Name CRIPPEN, STANDISH C  
Address 16 CASTLE COURT  
City-State-Zip: FORT PIERCE FL 34949

Title PRESIDENT  
Name CRIPPEN, SCOTT S  
Address 16 CASTLE COURT  
City-State-Zip: FORT PIERCE FL 34949

Title SECRETARY  
Name CRIPPEN, AUDREY  
Address 16 CASTLE CT  
City-State-Zip: FORT PIERCE FL 34949

*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:** SCOTT CRIPPEN

P

02/19/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date