

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000010641

**Entity Name:** 6767 OP SYSTEMS, LLC

**Current Principal Place of Business:**

6767 PHILLIPS INDUSTRIAL BLVD  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

6767 PHILIPS INDUSTRIAL BLVD  
JACKSONVILLE, FL 32256 US

**FEI Number:** 20-8356132

**Certificate of Status Desired:** No

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

WHYTE, STEVE  
6767 PHILLIPS INDUSTRIAL BLVD  
JACKSONVILLE, FL 32256 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 MGR  
Name HART, JOHN B  
Address PO BOX 2526  
City-State-Zip: PONTE VEDRA BCH FL 32004-2526

Title MGR  
Name HART, LITA G  
Address PO BOX 2526  
City-State-Zip: PONTE VEDRA BCH FL 32004-2526

*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:** LITA HART

**MANAGER**

**03/23/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date