

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000022104

**Entity Name:** 554 LOMAX, LLC

**Current Principal Place of Business:**

1871 MONTGOMERY PLACE  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

1871 MONTGOMERY PLACE  
JACKSONVILLE, FL 32205 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ROSENBERG, MARK  
1871 MONGOMERY PLACE  
JACKSONVILLE, FL 32205 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:** MARK L. ROSENBERG

01/09/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ROSENBERG, MARK L  
Address 554 LOMAX STREET  
City-State-Zip: JACKSONVILLE FL 32204

*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:** MARK L. ROSENBERG

MANAGER

01/09/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date