

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000043691

**Entity Name:** BLACKMAN ENTERPRISES LLC

**Current Principal Place of Business:**

157 PINE CONE DRIVE  
DAVENPORT, FL 33897

**Current Mailing Address:**

157 PINE CONE DRIVE  
DAVENPORT, FL 33897 US

**FEI Number:** 75-3239091

**Certificate of Status Desired:** No

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

HIGGINSON, DAVID  
728 SOUTH DILLARD ST  
WINTER GARDEN, FL 34787 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	Title	MGR
Name	BLACKMAN, MICHELLE	Name	BLACKMAN, GEORGE M
Address	157 PINE CONE DRIVE	Address	157 PINE CONE DRIVE
City-State-Zip:	DAVENPORT FL 33897	City-State-Zip:	DAVENPORT FL 33897

*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:** MICHELLE BLACKMAN

**OWNER**

**01/09/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date