

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000012330

Entity Name: MORGANFORD HOLDING, LLC**Current Principal Place of Business:**12103 DIVIDING OAKS TRAIL EAST
JACKSONVILLE, FL 32223**Current Mailing Address:**12103 DIVIDING OAKS TRAIL EAST
JACKSONVILLE, FL 32223 US**FEI Number:** 26-1895334**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PIERSOL, MIRANDA H
12103 DIVIDING OAKS TRAIL EAST
JACKSONVILLE, FL 32223 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	HOLLIFIELD, GARY E
Address	12103 DIVIDING OAKS TRAIL EAST
City-State-Zip:	JACKSONVILLE FL 32223

Title	MANAGER
Name	PIERSOL, MIRANDA H
Address	12103 DIVIDING OAKS TRAIL EAST
City-State-Zip:	JACKSONVILLE FL 32223

Title	MGR
Name	HOLLIFIELD, CELIA C
Address	12103 DIVIDING OAKS TRAIL EAST
City-State-Zip:	JACKSONVILLE FL 32223

Title	MANAGER
Name	CLARK, SUZANNE HOLLIFIELD ESQ.
Address	1055 LARKSPUR LOOP
City-State-Zip:	JACKSONVILLE FL 32259

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: GARY HOLLIFIELD

MANAGER

01/21/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date