

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000015590

**Entity Name:** EXPERIENCED PROPERTIES, LLC

**Current Principal Place of Business:**

1072 LEEDA DRIVE  
JACKSONVILLE, FL 32254

**Current Mailing Address:**

1494 MORGAN STREET  
JACKSONVILLE, FL 32209 US

**FEI Number:** 26-1988245

**Certificate of Status Desired:** Yes

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

SAUNDERS, SIDNEY  
1072 LEEDA DRIVE  
JACKSONVILLE, FL 32254 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 MGRM  
Name SAUNDERS, SIDNEY  
Address 1072 LEEDA DRIVE  
City-State-Zip: JACKSONVILLE FL 32254

Title MGRM  
Name SAUNDERS, BOBBIE  
Address 1072 LEEDA DRIVE  
City-State-Zip: JACKSONVILLE FL 32254

*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:** BOBBIE S SAUNDERS

**MGRM**

**03/08/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date