## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000069468

Entity Name: 1640RIVER, LLC

**Current Principal Place of Business:** 

421 SE ALFRED MARKHAM STREET

LAKE CITY, FL 32055

**Current Mailing Address:** 

421 SE ALFRED MARKHAM STREET LAKE CITY. FL 32055 US

FEI Number: 30-0501054 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES, WILLIAM S 421 SE ALFRED MARKHAM STREET LAKE CITY, FL 32025 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

**FILED** Feb 25, 2014

**Secretary of State** 

CC9124693185

Authorized Person(s) Detail:

Title MGR

Title MGR

JONES, SHARON L Name JONES, WILLIAM S Name

421 SE ALFRED MARKHAM STREET Address 421 SE ALFRED MARKHAM STREET Address

City-State-Zip: LAKE CITY FL 32055 City-State-Zip: LAKE CITY FL 32055

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: SHARON JONES **MANAGER** 

Electronic Signature of Signing Authorized Person(s) Detail

02/25/2014 Date