

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000101801

**Entity Name:** 239 SANDY CIRCLE, LLC

**Current Principal Place of Business:**

6421 SPRUCE CREEK ROAD  
PORT ORANGE, FL 32127

**Current Mailing Address:**

6421 SPRUCE CREEK ROAD  
PORT ORANGE, FL 32127

**FEI Number:** 26-3597226

**Certificate of Status Desired:** No

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

SHAFER, WILLIAM  
6421 SPRUCE CREEK ROAD  
PORT ORANGE, FL 32127 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 SHAFER, WILLIAM  
Address 6421 SPRUCE CREEK ROAD  
City-State-Zip: PORT ORANGE FL 32127

Title MGR  
Name EASON, NORMAN  
Address 213 SANDY CIRCLE  
City-State-Zip: SOUTH DAYTONA FL 32119

*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:** WILLIAM SHAFER

MGR

01/08/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date