## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000022620

Entity Name: CRAIG R. WILSON, LLC

## **Current Principal Place of Business:**

7747 BARTHOLOMEW DRIVE NORTH FORT MYERS, FL 33917

## **Current Mailing Address:**

7747 BARTHOLOMEW DRIVE NORTH FORT MYERS, FL 33917 US

# FEI Number: NOT APPLICABLE

### Name and Address of Current Registered Agent:

WILSON, CRAIG R 7747 BARTHOLOMEW DRIVE NORTH FORT MYERS, FL 33917 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

## Authorized Person(s) Detail :

Title	MGR	Title	MGRM
Name	WILSON, CRAIG R	Name	WILSON, NANCY L
Address	7747 BARTHOLOMEW DRIVE	Address	7747 BARTHOLOMEW DRIVE
City-State-Zip:	NORTH FORT MYERS FL 33917	City-State-Zip:	NORTH FORT MYERS FL 33917

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: CRAIG R. WILSON

MGR

04/24/2015 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 24, 2015 Secretary of State CC7570964004

Date

Certificate of Status Desired: No