

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000041454

**Entity Name:** SULLIVAN'S HOLDINGS, LLC

**Current Principal Place of Business:**

10651 SW WESTLAWN BLVD.  
PORT ST. LUCIE, FL 34987

**Current Mailing Address:**

10651 SW WESTLAWN BLVD.  
PORT ST. LUCIE, FL 34987

**FEI Number:** 27-4779251

**Certificate of Status Desired:** No

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

SULLIVAN, SHAWN  
10651 SW WESTLAWN BLVD.  
PORT ST LUCIE, FL 34987 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 SULLIVAN, SHAWN  
Address 10651 SW WESTLAWN BLVD.  
City-State-Zip: PORT ST LUCIE FL 34987

Title MGRM  
Name LOVETT, DIANNE  
Address 7455 PRINCETON TRCE NE  
City-State-Zip: ATLANTA GA 30328

*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:** SHAWN SULLIVAN

MGMR

04/15/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date