# 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000096068

Entity Name: TOOTH & NAIL FARMS, LLC

## Current Principal Place of Business:

115 ALLEN MEMORIAL WAY PORT ST. JOE, FL 32456

# **Current Mailing Address:**

115 ALLEN MEMORIAL WAY PORT ST. JOE, FL 32456 US

# FEI Number: NOT APPLICABLE

## Name and Address of Current Registered Agent:

MAY, FRANK D 115 ALLEN MEMORIAL WAY PORT ST. JOE, FL 32456 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	MGRM	Title	MGRM
Name	MAY, FRANK D	Name	SMITH, JASPER L
Address	115 ALLEN MEMORIAL WAY	Address	905 MONUMENT AVENUE
City-State-Zip:	PORT ST. JOE FL 32456	City-State-Zip:	PORT ST. JOE FL 32456

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: FRANK D. MAY

MGRM

01/22/2015 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 22, 2015 Secretary of State CC4550165637

Certificate of Status Desired: No

Date