

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000018638

Entity Name: ALSOP PROPERTY MANAGEMENT, LLC

Current Principal Place of Business:

77 ALMERIA ST.
ST. AUGUSTINE, FL 32084

Current Mailing Address:

P.O. BOX 1389
ST. AUGUSTINE, FL 32085 US

FEI Number: 27-1961392

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REPASS, D.R. ESQ.
501 RIVERSIDE AVE. SUITE 901
JACKSONVILLE, FL 32202 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 KILLEBREW, JESSE
Address P.O. BOX 1389
City-State-Zip: ST. AUGUSTINE FL 32085

Title MGRM
Name ANDREW NORGART
Address P.O. BOX 1389
City-State-Zip: ST. AUGUSTINE FL 32085

Title MGR
Name FOREMAN, DANIELLE
Address P.O. BOX 1389
City-State-Zip: ST. AUGUSTINE FL 32085

Title MANAGER
Name RAULERSON, JANEEN L
Address P.O. BOX 1389
City-State-Zip: ST. AUGUSTINE FL 32085

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: JANEEN L RAULERSON

MANAGER

04/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date