

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000088926

Entity Name: FAMILY HOMEPLACE LLC

Current Principal Place of Business:

343 W 7TH STREET
JACKSONVILLE, FL 32206

Current Mailing Address:

343 W 7TH STREET
JACKSONVILLE, FL 32206 US

FEI Number: 27-3327420

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOSE, DAVID
343 W 7TH STREET
JACKSONVILLE, FL 32206 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 JOSE, DAVID J
Address 343 W 7TH STREET
City-State-Zip: JACKSONVILLE FL 32206

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: DAVID JOSE

MANAGER

04/28/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date