

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000014606

**Entity Name:** 1965 TNLW, LLC

**Current Principal Place of Business:**

1965 THOMPSON NURSERY ROAD  
LAKE WALES, FL 33859

**Current Mailing Address:**

POST OFFICE BOX 1427  
LAKE WALES, FL 33859

**FEI Number:** 27-4841154

**Certificate of Status Desired:** No

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

TURNER, MARK G  
255 MAGNOLIA AVENUE, SOUTHWEST  
WINTER HAVEN, FL 33880 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	Title	MGRM
Name	HENRY, CHARLES S	Name	BELIVEAU, STEPHAN S
Address	POST OFFICE BOX 1427	Address	POST OFFICE BOX 1427
City-State-Zip:	LAKE WALES FL 33859	City-State-Zip:	LAKE WALES FL 33859

*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:** STEPHAN BELIVEAU

MGRM

01/14/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date