

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000097827

**Entity Name:** 2337 SW PAMONA LLC

**Current Principal Place of Business:**

4483 NE SKYLINE DR  
JENSEN BEACH, FL 34957

**Current Mailing Address:**

4483 NE SKYLINE DR  
JENSEN BEACH, FL 34957 US

**FEI Number:** 45-3080756

**Certificate of Status Desired:** No

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

PORTER, JAMES  
4483 NE SKYLINE DR  
JENSEN BEACH, FL 34957 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 PORTER, JAMES  
Address 4483 NE SKYLINE DR  
City-State-Zip: JENSEN BEACH FL 34957

*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:** JAMES T PORTER

MGRM

04/24/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date