2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 05, 2014
Secretary of State
CC7803504819

DOCUMENT# L12000139126

Entity Name: FINGER, NELSON & MAGUIRE, PLLC

Current Principal Place of Business:

1650 MARGARET STREET, SUITE 302 #258
JACKSONVILLE, FL 32204-3689

Current Mailing Address:

1650 MARGARET STREET, SUITE 302 #258
JACKSONVILLE, FL 32204-3689

FEI Number: 46-1345724

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRANT, ABRAHAM, REITER, MCCORMICK & JOHNSO
50 NORTH LAURA STREET, SUITE 2750
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	Title	MGRM
Name	FINGER, WILLIAM L ESQ.	Name	NELSON, KRISTINA G ESQ.
Address	1650 MARGARET STREET, SUITE 302 #258	Address	1650 MARGARET STREET, SUITE 302 #258
City-State-Zip:	JACKSONVILLE FL 32204-3689	City-State-Zip:	JACKSONVILLE FL 32204-3689

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: WILLIAM L FINGER MANAGING MEMBER 03/05/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date