

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000011095

**Entity Name:** MARSHALL'S DOOR & WINDOW REPAIR LLC

**Current Principal Place of Business:**

1240 SHALLOWFORD DR. W  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

1240 SHALLOWFORD DR. W  
JACKSONVILLE, FL 32225 US

**FEI Number:** 46-1846292

**Certificate of Status Desired:** No

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

WHALEY, MARTY  
1240 SHALLOWFORD DR. W  
JACKSONVILLE, FL 32225 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 MGR  
Name WHALEY, MARSHALL  
Address 1240 SHALLOWFORD DR. W  
City-State-Zip: JACKSONVILLE FL 32225

*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:** MARSHALL WHALEY

MGR

03/08/2016

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

\_\_\_\_\_ Date