## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000034491

Entity Name: 4123 DD, LLC

**Current Principal Place of Business:** 

4339 ROOSEVELT BLVD., STE 400 JACKSONVILLE, FL 32210

**Current Mailing Address:** 

PO 41123

JACKSONVILLE. FL 32203

**FEI Number: APPLIED FOR** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORRIS, WILLIAM H 4339 ROOSEVELT BLVD., STE 400 JACKSONVILLE, FL 32210 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.

Title

Name

Address

City-State-Zip:

MGR

PO 41123

HARBISON, STUART

JACKSONVILLE FL 32203

SIGNATURE:

Address

Electronic Signature of Registered Agent

Date

**FILED** Apr 22, 2015

**Secretary of State** 

CC5112465902

Authorized Person(s) Detail:

Title MGRM

MORRIS, WILLIAM H Name

PO 41123

JACKSONVILLE FL 32203 City-State-Zip:

Title MGR

ESTES, JANE Name

Address PO 41123

City-State-Zip: JACKSONVILLE FL 32203

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 H. MORRIS

**CEO** 

04/22/2015