

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000041459

Entity Name: LINDA WILLSON-SHAVERS, LLC

Current Principal Place of Business:

4174 SANDHILL CRANE TERRACE
MIDDLEBURG, FL 32068

Current Mailing Address:

4174 SANDHILL CRANE TERRACE
MIDDLEBURG, FL 32068

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLSON-SHAVERS, LINDA H
4174 SANDHILL CRANE TERRACE
MIDDLEBURG, FL 32068 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 OWNER
Name WILLSON-SHAVERS, LINDA
Address 4174 SANDHILL CRANE TERRACE
City-State-Zip: MIDDLEBURG FL 32068

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: LINDA WILLSON-SHAVERS

OWNER

04/27/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date