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	: JOHN A FISHER			04/03/2019
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MANAGER	Title	MANAGER	
Name	BOERNER, BRAD	Name	FISHER, JOHN A	
Address	12333 UNIVERSITY AVENUE	Address	4040 GULF SHORE BLVD N	
City-State-Zip:	CLIVE IA 50325	City-State-Zip:	NAPLES FL 34103	
Title	MANAGER			
Name	BURKE, CINDY S			
Address	1207 CENTRAL AVENUE			

DOCUMENT# L13000056864

Entity Name: 14702 TARMAC COURT, LLC

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

3360 PINE RIDGE ROAD NAPLES. FL 34109

Current Mailing Address:

3360 PINE RIDGE ROAD NAPLES, FL 34109

FEI Number: 46-2950132

Name and Address of Current Registered Agent:

FISHER, JOHN A 4040 GULF SHORE BLVD N NAPLES, FL 34103 US

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: JOHN A. FISHER

City-State-Zip: FORT DODGE IA 50501

04/03/2019

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 03, 2019 Secretary of State 6710067386CC

Certificate of Status Desired: No

MANAGER

Date