

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000012918

**Entity Name:** 129 WALKER, LLC

**Current Principal Place of Business:**

129 WALKER CIRCLE E  
CRESTVIEW, FL 32539

**Current Mailing Address:**

PO BOX 1521  
NICEVILLE, FL 32588 US

**FEI Number:** 46-4622797

**Certificate of Status Desired:** No

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

WIDMAN, SHANNON L  
600 GRAND BLVD  
STE. #201  
DESTIN, FL 32550 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 DALI, KELLE L  
Address PO BOX 1521  
City-State-Zip: NICEVILLE FL 32588

*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:** KELLE DALI

MBR

02/19/2015

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

\_\_\_\_\_  
Date