

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000066264

Entity Name: SHADOW OAK FARMS LLC

Current Principal Place of Business:

261 CAPPELLA COURT
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

P.O. BOX 290940
PORT ORANGE, FL 32129 US

FEI Number: 46-5481448

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHNSON, ANDREW M
261 CAPPELLA COURT
NEW SMYRNA BEACH, FL 32168 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 JOHNSON, ANDREW M
Address 261 CAPPELLA COURT
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title AMBR
Name JOHNSON, JANET L
Address 261 CAPPELLA COURT
City-State-Zip: NEW SMYRNA BEACH FL 32168

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: ANDREW JOHNSON

MANAGER

01/10/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date