

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000085004

**Entity Name:** GAINESVILLE GREEN FARMS LLC

**Current Principal Place of Business:**

15105 NW 94 AVE  
ALACHUA, FL 32615

**Current Mailing Address:**

15105 NW 94 AVE  
ALACHUA, FL 32615 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

ROBERT D, WALLACE  
15105 NW 94 AVE  
ALACHUA, FL 32615 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 WALLACE, ROBERT D  
Address 15105 NW 94 AVE  
City-State-Zip: ALACHUA FL 32615

Title MGRM  
Name GAW, DEBORAH  
Address 15105 NW 94 AVE  
City-State-Zip: ALACHUA FL 32615

*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:** ROBERT D. WALLACE

**MGRM**

**04/06/2017**

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

\_\_\_\_\_  
Date