

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000104140

Entity Name: SAND 2014 MANAGEMENT, LLC.

Current Principal Place of Business:

1982 STATE ROAD 44, #173
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

1982 STATE ROAD 44, #173
NEW SMYRNA BEACH, FL 32168

FEI Number: 47-1442881

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WAGGONER, DARREN P
1982 STATE ROAD 44, #173
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 AMBR
Name WAGGONER, DARREN P
Address PO BOX 232
City-State-Zip: STUDLEY VA 23162

Title AMBR
Name WAGGONER, LILA MARCELA
Address PO BOX 232
City-State-Zip: STUDLEY VA 23162

Title AMBR
Name SPROLES, STEVEN L
Address 9177 PEMBRIDGE DRIVE
City-State-Zip: MECHANICSVILLE VA 23116

Title AMBR
Name APPLGATE GILLESPIE, ELIZABETH
Address 1042 BRYNMORE DRIVE
City-State-Zip: RICHMOND VA 23327

Title AMBR
Name SHELTON APPLGATE, ANNE
Address 118 MARIE DRIVE
City-State-Zip: PONCE INLET FL 32127

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: DARREN P. WAGGONER

PRESIDENT

02/21/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date