

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000189612

**Entity Name:** BOWEN BERRIES LLC

**Current Principal Place of Business:**

2100 SE HWY 42  
SUMMERFIELD, FL 34491

**Current Mailing Address:**

2100 SE HWY 42  
SUMMERFIELD, FL 34491 MA

**FEI Number:** 47-3685656

**Certificate of Status Desired:** No

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

BOWEN, SHIRLEY E  
2100 SE HWY 42  
SUMMERFIELD, FL 34491 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	Title	MGR
Name	WOLF, DAVID	Name	BOWEN, SHIRLEY
Address	2100 SE HWY 42	Address	2100 SE HWY 42
City-State-Zip:	SUMMERFIELD FL 34491	City-State-Zip:	SUMMERFIELD FL 34491

*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:** SHIRLEY BOWEN

**TITLE** MGR

**04/23/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date