

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000114671

**Entity Name:** BERNECKER'S LLC

**Current Principal Place of Business:**

1679 NE COUNTY ROAD 337  
HIGH SPRINGS, FL 32643

**Current Mailing Address:**

P.O. BOX 1039  
HIGH SPRINGS, FL 32655

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

BERNECKER, DONALD L  
1679 NE COUNTY ROAD 337  
HIGH SPRINGS, FL 32643 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 BERNECKER, DONALD L  
Address 1679 NE COUNTY RD 337  
City-State-Zip: HIGH SPRINGS FL 32643

Title AMBR  
Name BERNECKER, JUDITH  
Address 1679 NE COUNTY RD 337  
City-State-Zip: HIGH SPRINGS FL 32643

*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:** DONALD L BERNECKER

AMBR

03/15/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date