

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000161259

Entity Name: NEWBANKS, LLC**Current Principal Place of Business:**601 N MAGNOLIA AVE STE 120
ORLANDO, FL 32801**Current Mailing Address:**601 N MAGNOLIA AVE STE 120
ORLANDO, FL 32801**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MEIER, GREGORY W ESQ
SHUFFIELD, LOWMAN & WILSON, P.A.
1000 LEGION PL STE 1700
ORLANDO, FL 32801 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:** GREGORY W. MEIER

04/29/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MANAGER
Name	SELF, JAMES W JR
Address	3050 SHALLOWFORD RD STE 200
City-State-Zip:	CHAMBLEE GA 30341

Title	MANAGER
Name	MEANS, HUGH F
Address	3050 SHALLOWFORD RD STE 200
City-State-Zip:	CHAMBLEE GA 30341

Title	MANAGER
Name	SULLIVAN, ROBERT A
Address	601 N MAGNOLIA AVE STE 120
City-State-Zip:	ORLANDO FL 32801

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 A. SULLIVAN

MANAGER

04/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date