

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000164511

Entity Name: HAMMOCK BEACH CONSULTING LLC

Current Principal Place of Business:

60 SURFVIEW DR., #408
PALM COAST, FL 32137

Current Mailing Address:

P.O. BOX 354462
PALM COAST, FL 32135

FEI Number: 47-5042489

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRADSHAW, ROBERT
16 SEASIDE CAPERS RD.
ST.AUGUSTINE, FL 32084 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 JONES, DAVID J
Address 60 SURFVIEW DR., #408
City-State-Zip: PALM COAST FL 32137

Title DIRECTOR
Name JONES, ANDREW LLOYD
Address 60 SURFVIEW DR., #408
City-State-Zip: PALM COAST FL 32137

Title DIRECTOR
Name JONES, ALEXANDER ROBERT
Address 1814 QUEENS WAY
City-State-Zip: CHAMBLEE GA 30342

Title DIRECTOR OF LOGISTICS
Name HAUTH, CASSANDRA
Address 60 SURFVIEW DR., #408
City-State-Zip: PALM COAST FL 32137

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: DAVID J JONES

MANAGER

01/13/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date