

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000003387

Entity Name: JOHN C SULLIVAN LLC

Current Principal Place of Business:

613 ALBANY CT
LONGWOOD, FL 32779

Current Mailing Address:

613 ALBANY CT
LONGWOOD, FL 32779

FEI Number: 56-2436992

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SULLIVAN, JOHN C
613 ALBANY CT
LONGWOOD, FL 32779 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 | AR |
| Name | SULLIVAN, JOHN C | Name | SULLIVAN, IVONNE G |
| Address | 613 ALBANY CT | Address | 613 ALBANY CT |
| City-State-Zip: | LONGWOOD FL 32779 | City-State-Zip: | LONGWOOD FL 32779 |

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: JOHN C SULLIVAN

MGR

03/16/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date