

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000082772

**Entity Name:** L. JONES PROPERTIES FIVE LLC

**Current Principal Place of Business:**

8500 NW 22 AVE  
MIAMI, FL 33147

**Current Mailing Address:**

PO BOX 470815  
MIAMI, FL 33247 US

**FEI Number:** 45-5633592

**Certificate of Status Desired:** No

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

JONES, LEONZIE  
8500 NW 22 AVE  
MIAMI, FL 33147 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, LEONZIE  
Address 8500 NW 22 AVE  
City-State-Zip: MIAMI FL 33147

Title MGR  
Name JONES, ANTWAINE L  
Address PO BOX 470815  
City-State-Zip: MIAMI FL 33247

Title MGR  
Name JONES, FLONNIE M  
Address PO BOX 470815  
City-State-Zip: MIAMI FL 33247

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:** ANTWAINE JONES

**MGR**

**04/24/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date