

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000065418

**Entity Name:** WESCOTT GROVES, LLC**Current Principal Place of Business:**650 N ROCK ROAD  
FORT PIERCE, FL 34945**Current Mailing Address:**PO BOX 2457  
FORT PIERCE, FL 34954 US**FEI Number:** 59-1378736**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ABERNETHY, BRUCE R JR  
130 S INDIAN RIVER DR STE 201  
FORT PIERCE, FL 34950 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	SCOTT, KENNETH T
Address	PO BOX 2457
City-State-Zip:	FORT PIERCE FL 34954

Title	MGR
Name	SCOTT, ALFRED W
Address	PO BOX 2457
City-State-Zip:	FORT PIERCE FL 34954

Title	MGR
Name	SCOTT, DAN C
Address	PO BOX 2457
City-State-Zip:	FORT PIERCE FL 34954

Title	MGR
Name	SCOTT, WAYNE A
Address	PO BOX 2457
City-State-Zip:	FORT PIERCE FL 34954

*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: KENNETH T SCOTT****MANAGER****04/27/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date