

2020 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L17000140588

Entity Name: 95 & WICKHAM, LLC

Current Principal Place of Business:

400 HIGH POINT DRIVE
SUITE 500
COCOA, FL 32926

Current Mailing Address:

P. O. BOX 1179
SHARPES, FL 32959-1179 US

FEI Number: APPLIED FOR

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SIMPKINS, JILL K
844 RIVERSIDE DR
ORMOND BEACH, FL 32176 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 MANAGER
Name SIMPKINS, JILL K
Address P. O. BOX 1179
City-State-Zip: SHARPES FL 32959-1179

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: JILL K SIMPKINS

MANAGER

06/18/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date