# 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L20000292397

### Entity Name: 1865 WOODMERE LLC

# Current Principal Place of Business:

4530-15 ST JOHNS AVE BOX 304 JACKSONVILLE, FL 32210

# **Current Mailing Address:**

4530-15 ST JOHNS AVE BOX 304 JACKSONVILLE, FL 32210 US

# FEI Number: 87-1345384

# Name and Address of Current Registered Agent:

SMITH, DAVID 4530-15 ST JOHNS AVE BOX 304 JACKSONVILLE, FL 32210 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

## Authorized Person(s) Detail :

Authonized Person(s) Detail .				
Title	MGR	Title	MGR	
Name	SMITH, DAVID	Name	SMITH, CLAIRE	
Address	4530-15 ST JOHNS AVE BOX 304	Address	4530-15 ST JOHNS AVE BOX 304	
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210	

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 SMITH

MGR

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

Date