

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000001189

**Entity Name:** WOOLEVER PROPERTIES, LLC

**Current Principal Place of Business:**

1115 SOUTH MAIN STREET  
BROOKSVILLE, FL 34601

**Current Mailing Address:**

P.O. BOX 10160  
BROOKSVILLE, FL 34603 US

**FEI Number:** 02-0573020

**Certificate of Status Desired:** No

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

WOOLEVER, RAYMOND D  
1115 SOUTH MAIN STREET  
BROOKSVILLE, FL 34601 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 MEMBER  
Name WOOLEVER, RAYMOND D  
Address 1115 SOUTH MAIN STREET  
City-State-Zip: BROOKSVILLE FL 34601

Title MGR MEMBER  
Name WOOLEVER, SUSAN L  
Address 1115 SOUTH MAIN STREET  
City-State-Zip: BROOKSVILLE FL 34601

Title CORPORATE SECRETARY  
Name WOOLEVER, ROSEMARY  
Address 1115 SOUTH MAIN STREET  
City-State-Zip: BROOKSVILLE FL 34601

Title VP, TREASURER  
Name VITALE, RACHEL  
Address 1115 SOUTH MAIN STREET  
City-State-Zip: BROOKSVILLE FL 34601

*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:** SUSAN WOOLEVER

**MGR MEMBER**

**01/25/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date