

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000007845

**Entity Name:** WOODLAWN TERRACE, LLC

**Current Principal Place of Business:**

200 SOUTH WOODLAWN ST  
ST. AUGUSTINE, FL 32095

**Current Mailing Address:**

448 DEPOT STREET NE  
CHRISTIANSBURG, VA 24073 US

**FEI Number: 02-0582955**

**Certificate of Status Desired: No**

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

BROAD & CASSELL CORPORATE SERVICES  
390 NORTH ORANGE AVENUE  
SUITE 1400  
ORLANDO, FL 32801 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            CEO  
Name            CASPER, JANAKA  
Address        448 DEPOT STREET NE  
City-State-Zip: CHRISTIANSBURG VA 24073

Title            PRESIDENT, TREASURER  
Name            REED, JEFFREY K  
Address        448 DEPOT STREET NE  
City-State-Zip: CHRISTIANSBURG VA 24073

Title            VP  
Name            HALL, ANDY  
Address        448 DEPOT ST NE  
City-State-Zip: CHRISTIANSBURG VA 24073

*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: JANAKA CASPER**

**CEO**

**01/09/2018**

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

\_\_\_\_\_  
Date