

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000016349

**Entity Name:** PUBLIX TENNESSEE, LLC

**Current Principal Place of Business:**

3300 PUBLIX CORPORATE PKWY  
LAKELAND, FL 33811

**Current Mailing Address:**

PO BOX 32027  
LICENSES  
LAKELAND, FL 33802-2027 US

**FEI Number:** 02-0626221

**Certificate of Status Desired:** Yes

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

ATTAWAY, JOHN AJR  
3300 PUBLIX CORPORATE PKWY  
LAKELAND, FL 33811-3003 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 MGRM  
Name CRENSHAW, WILLIAM  
Address 3300 PUBLIX CORPORATE PKWY  
City-State-Zip: LAKELAND FL 33811

Title MGRM  
Name PHILLIPS, DAVID P  
Address 3300 PUBLIX CORPORATE PKWY  
City-State-Zip: LAKELAND FL 33811

Title MGRM  
Name ATTAWAY, JOHN AJR.  
Address 3300 PUBLIX CORPORATE PKWY  
City-State-Zip: LAKELAND FL 33811

Title MGRM  
Name CHAMBERLAIN, JEFFREY G  
Address 3300 PUBLIX CORPORATE PKWY  
City-State-Zip: LAKELAND FL 33811

Title MGRM  
Name DIBENEDETTO, JOSEPH D  
Address 3300 PUBLIX CORPORATE PKWY  
City-State-Zip: LAKELAND FL 33811

*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:** JOHN A ATTAWAY JR

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02/08/2017

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

\_\_\_\_\_  
Date