

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000016349

**FILED**  
**Apr 07, 2020**  
**Secretary of State**  
**2770029458CC**

**Entity Name:** PUBLIX TENNESSEE, LLC

**Current Principal Place of Business:**

3300 PUBLIX CORPORATE PKWY  
LAKELAND, FL 33811

**Current Mailing Address:**

3300 PUBLIX CORPORATE PKWY  
LAKELAND, FL 33811 US

**FEI Number:** 02-0626221

**Certificate of Status Desired:** Yes

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

CORPORATE CREATIONS NETWORK, INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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:** MERRIANN M. METZ

04/07/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

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

Title           SECRETARY  
Name           METZ, MERRIANN M.  
Address        3300 PUBLIX CORPORATE PKWY  
City-State-Zip: LAKELAND FL 33811

Title           VP  
Name           BORNMANN, DAVID E.  
Address        3300 PUBLIX CORPORATE PKWY  
City-State-Zip: LAKELAND FL 33811

Title           VP  
Name           JONCZYK, KRIS  
Address        3300 PUBLIX CORPORATE PKWY  
City-State-Zip: LAKELAND FL 33811

Title           PRESIDENT  
Name           JONES, RANDALL T. SR.  
Address        3300 PUBLIX CORPORATE PKWY  
City-State-Zip: LAKELAND FL 33811

Title           VP  
Name           BALCERAK, ROBERT S.  
Address        3300 PUBLIX CORPORATE PKWY  
City-State-Zip: LAKELAND FL 33811

Title           VP  
Name           MCGARRITY, ROBERT J.  
Address        3300 PUBLIX CORPORATE PKWY  
City-State-Zip: LAKELAND FL 33811

Title           VP  
Name           RAYBURN, WILLIAM W. IV  
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:** MERRIANN M. METZ

**SECRETARY**

04/07/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date