

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000202

Entity Name: GINA M. COLLEY, LLC

Current Principal Place of Business:

565 DEER POINTE ROAD
WEST CHESTER, FL 19382

Current Mailing Address:

565 DEER POINTE ROAD
WEST CHESTER, FL 19382

FEI Number: 01-0569490

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 COLLEY-HOLGATE, GINA MMGRM
Address 565 DEER POINTE ROAD
City-State-Zip: WEST CHESTER PA 19382

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: GINA M. COLLEY-HOLGATE

MANAGER

01/16/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date