

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000003406

Entity Name: ST. JOHNS LLC

Current Principal Place of Business:

530 S. RONALD REAGAN BLVD, SUITE 100
LONGWOOD, FL 32750

Current Mailing Address:

530 S. RONALD REAGAN BLVD, SUITE 100
LONGWOOD, FL 32750 US

FEI Number: 45-0499069

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FIGUEIREDO, MARIE T
530 S. RONALD REAGAN BLVD. #100
LONGWOOD, FL 32750 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 FIGUEIREDO, MARIE T
Address 530 S. RONALD REAGAN BLVD. #100
City-State-Zip: LONGWOOD FL 32750

Title MGRM
Name MAKSIMOWICZ, ROBERT J
Address 530 S. RONALD REAGAN BLVD. #100
City-State-Zip: LONGWOOD FL 32750

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: MARIE. T. FIGUEIREDO

MGRM

01/28/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date