## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000012422

Entity Name: BOLAND'S LLC

**Current Principal Place of Business:** 

1403 MILLBURN DR. CONKLIN. NY 13748

**Current Mailing Address:** 

1403 MILLBURN DR. CONKLIN. NY 13748

FEI Number: 20-2199754 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BOLAND, JAMIN E 231 NW PLEASANT GROVE WAY PORT ST. LUCIE, FL 34986 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

**FILED** Feb 29, 2016

**Secretary of State** 

CC4539904185

Authorized Person(s) Detail:

Title MGRM Title

BOLAND, JAMIN E Name BOLAND, MICHAEL J Name 290 FOX HOLLOW RD Address 145 SMITH HILL RD Address

City-State-Zip: BINGHAMTON NY 13904 City-State-Zip: BINGHAMTON NY 13905

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: JAMIN E BOLAND

**MGRM** 

**MGRM** 

02/29/2016