## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000104531

Entity Name: CONNORS GIFTS, LLC

**Current Principal Place of Business:** 

218 W TOMPKINS STREET INVERNESS, FL 34450

**Current Mailing Address:** 

218 W TOMPKINS STREET INVERNESS, FL 34450

FEI Number: 20-3675040 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VANALLEN, LINDA C 218 W TOMPKINS ST INVERNESS, FL 34450 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.

Title

**MGRM** 

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Apr 19, 2016

**Secretary of State** 

CC9204154598

Authorized Person(s) Detail:

Title MGRM

NameVANALLEN, LINDA CNameCONNORS, WALTER DIIAddress1811 S SPIVEY TERRACEAddress9375 E SWEETWATER DRCity-State-Zip:INVERNESS FL 34450City-State-Zip:INVERNESS FL 34450

Title MGRM Title MGRM

NameFITZPATRICK, BRENDA CNameHIMMEL, SANDRA CAddress37 N BRAEMERAddress201 W HIGHLAND BLVDCity-State-Zip:INVERNESS FL 34450City-State-Zip:INVERNESS FL 34452

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: LINDA VANALLEN MGRM 04/19/2016