

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000003966

Entity Name: N223EA, LLC**Current Principal Place of Business:**3320 THOMASVILLE ROAD
TALLAHASSEE, FL 32308**Current Mailing Address:**3320 THOMASVILLE ROAD
TALLAHASSEE, FL 32308**FEI Number:** 26-0133729**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARRAWAY, F. WILSON III
3320 THOMASVILLE ROAD
TALLAHASSEE, FL 32308 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	CARRAWAY, F. WILSON III
Address	3320 THOMASVILLE ROAD
City-State-Zip:	TALLAHASSEE FL 32308

Title	MGRM
Name	SMITH, RANKIN M
Address	5984 US 19 S
City-State-Zip:	THOMASVILLE GA 31757

Title	MGRM
Name	BOSTON TRACTOR CO. INC.
Address	P.O. BOX 95
City-State-Zip:	DIXIE GA 31629

Title	MGRM
Name	BEECHWOOD WINGS, LLC
Address	13605 MOCCASIN GAP ROAD
City-State-Zip:	TALLAHASSEE FL 32309

Title	MGRM
Name	WINDSTORM INVESTMENTS, LLC
Address	P.O. BOX 2422
City-State-Zip:	TALLAHASSEE FL 32316

Title	MGRM
Name	SOUTHWEST GEORGIA OIL CO. INC.
Address	P.O. BOX 1510
City-State-Zip:	BANBRIDGE GA 39818

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: F. WILSON CARRAWAY III**MANAGING PARTNER****03/31/2014**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date