

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000018569

Entity Name: ANCOSHORES, LLC**Current Principal Place of Business:**309 RICHARD JACKSON BLVD
SUITE 200/201
PANAMA CITY BEACH, FL 32407**Current Mailing Address:**414 SUMMERBROOKE DRIVE
TALLAHASSEE, FL 32312**FEI Number:** 76-0818178**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DYLAN, RIVERS
227 SOUTH CALHOUN
TALLAHASSEE, FL 32312 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	PRES
Name	RIVERS, GENE
Address	414 SUMMERBROOKE DR.
City-State-Zip:	TALLAHASSEE FL 32312

Title	SECR
Name	HELEN, STAFFORD
Address	309 RICHARD JACKSON BLVD., STE 200
City-State-Zip:	PANAMA CITY BEACH FL 32407

Title	SAA
Name	SCAPEROTTA, JOSEPH
Address	PO BOX 19215
City-State-Zip:	PANAMA CITY BEACH FL 32417

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: HELEN STAFFORD

SECR

03/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date