

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000053363

**Entity Name:** BIG RIVER DEVELOPERS, LLC

**Current Principal Place of Business:**

515 S. 6TH STREET  
MACCLENNY, FL 32063

**Current Mailing Address:**

515 S. 6TH STREET  
MACCLENNY, FL 32063

**FEI Number:** 65-1282123

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RHODEN, WILLIAM R  
515 S. 6TH STREET  
MACCLENNY, FL 32063 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 MGR  
Name RHODEN, THOMAS R  
Address 515 S. 6TH STREET  
City-State-Zip: MACCLENNY FL 32063

Title MGR  
Name RHODEN, WILLIAM R  
Address 515 S. 6TH STREET  
City-State-Zip: MACCLENNY FL 32063

Title MGR  
Name KNABB, TODD  
Address 515 S. 6TH STREET  
City-State-Zip: MACCLENNY FL 32063

Title MGR  
Name DORMAN, TOMMY  
Address 515 S. 6TH STREET  
City-State-Zip: MACCLENNY FL 32063

Title MGR  
Name CANADAY, JERRI  
Address 515 S. 6TH STREET  
City-State-Zip: MACCLENNY FL 32063

*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:** WILLIAM R RHODEN

MGR

04/24/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date