

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000091057

**Entity Name:** 1095 LLC

**Current Principal Place of Business:**

545 BLACKFIN CT.  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

545 BLACKFIN CT.  
JACKSONVILLE, FL 32207

**FEI Number:** 56-2048837

**Certificate of Status Desired:** No

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

PENNINGTON, ROBERT S  
545 BLACKFIN CT.  
JACKSONVILLE, FL 32225 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            PENNINGTON, ROBERT S  
Address        545 BLACKFIN CT.  
City-State-Zip: JACKSONVILLE FL 32225

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT S. PENNINGTON

MGR

04/06/2013

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date