

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000067080

**Entity Name:** C.E.R. LLC

**Current Principal Place of Business:**

2715 DUDLEY DR. W #C  
WEST PALM BEACH, FL 33415

**Current Mailing Address:**

2715 DUDLEY DR. W #C  
WEST PALM BEACH, FL 33415 US

**FEI Number:** 26-0423289

**Certificate of Status Desired:** No

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

HOLLABAUGH, JAMES RMGR  
2715 DUDLEY DR. W #C  
WEST PALM BEACH, FL 33415 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 HOLLABAUGH, JAMES  
Address 2715 DUDLEY DR. W #C  
City-State-Zip: WEST PALM BEACH FL 33415

Title MGRM  
Name HOLLABAUGH, LINDA  
Address 2715 DUDLEY DR. W #C  
City-State-Zip: WEST PALM BEACH FL 33415

Title MGRM  
Name WILSON, RANDALL WAYNE  
Address 3674 MOON BAY CIRCLE  
City-State-Zip: WELLINGTON FL 33414

Title MGRM  
Name WILSON, SHERRI LYNN  
Address 3674 MOON BAY CIRCLE  
City-State-Zip: WELLINGTON FL 33414

*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 HOLLABAUGH

MGRM

03/08/2018

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

\_\_\_\_\_ Date