## **2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000085518

**Entity Name: FLOVERLORD LLC** 

FILED
Jan 26, 2013
Secretary of State
CC8636326504

## **Current Principal Place of Business:**

8130 BAYMEADOWS CIRCLE, WEST

SUITE 207

JACKSONVILLE, FL 32256

## **Current Mailing Address:**

8130 BAYMEADOWS CIRCLE, WEST SUITE 207 JACKSONVILLE, FL 32256

FEI Number: 23-3967782 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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 MR. Title MR

Electronic Signature of Signing Authorized Person(s) Detail

Name PEARCE IV, JOHN C Name ELLEN, PEARCE L

Address 8130 BAYMEADOWS CIRCLE, WEST Address 8130 BAYMEADOWS CIRCLE, WEST,

S-207

City-State-Zip: JACKSONVILLE FL 32256 City-State-Zip: JACKSONVILLE FL 32256

Title MR.

Name PEARCE, ADAM

Address 8130 BAYMEADOWS CIRCLE, WEST,

S-207

City-State-Zip: JACKSONVILLE FL 32256

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.