

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000086901

Entity Name: PETER WINGATE CARPENTRY LLC

Current Principal Place of Business:

821 N. FOREST DRIVE
TALLAHASSEE, FL 32303

Current Mailing Address:

821 N. FOREST DRIVE
TALLAHASSEE, FL 32303 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WINGATE, PETER
821 N. FOREST DRIVE
TALLAHASSEE, FL 32303 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 MGRM
Name WINGATE, PETER
Address 821 N. FOREST DRIVE
City-State-Zip: TALLAHASSEE FL 32303

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: PETER WINGATE

MGRM

04/18/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date