

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000001718

Entity Name: 13679 ATLANTIC BLVD, LLC

Current Principal Place of Business:

13679 ATLANTIC BLVD.
JACKSONVILLE, FL 32225

Current Mailing Address:

PO BOX 51267
JACKSONVILLE BEACH, FL 32240

FEI Number: 27-0463658

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORGAN, JEREMIAH M
13679 ATLANTIC BLVD.
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 MGRM
Name MORGAN, JEREMIAH M
Address 13679 ATLANTIC BLVD.
City-State-Zip: JACKSONVILLE FL 32225

Title MGRM
Name MORGAN, ANTHONY L
Address 13679 ATLANTIC BLVD.
City-State-Zip: JACKSONVILLE FL 32225

Title MGMR
Name MORGAN, CLAIRE
Address 13679 ATLANTIC BLVD.
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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CLAIRE MORGAN

MGMR

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date