

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000071118

Entity Name: 142 STOCKTON, LLC

Current Principal Place of Business:

142 STOCKTON ST
JACKSONVILLE, FL 32204

Current Mailing Address:

PO BOX 50278
JACKSONVILLE BEACH, FL 32240

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LINDROS, GARY C
15496 SAN PABLO ROAD N
JACKSONVILLE, FL 32240 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 LINDROS, GARY C
Address PO BOX 50278
City-State-Zip: JACKSONVILLE BEACH FL 32240

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: GARY LINDROS

MGR

04/22/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date