

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000093246

**Entity Name:** MILTON AND MARION LIGHT, LLC

**Current Principal Place of Business:**

11190 N.W. 76TH TERRACE  
CHIEFLAND, FL 32626

**Current Mailing Address:**

11190 N.W. 76TH TERRACE  
CHIEFLAND, FL 32626

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

HILBERTH, KURT S  
C/O LAW OFFICE OF KURT S. HILBERTH, P.A.  
2021 TYLER STREET, SUITE 201  
HOLLYWOOD, FL 33020 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 GOODRICH, ROBERT C  
Address 11190 N.W. 76TH TERRACE  
City-State-Zip: CHIEFLAND FL 32626

Title MGRM  
Name GOODRICH, DONNA  
Address 11190 N.W. 76TH TERRACE  
City-State-Zip: CHIEFLAND FL 32626

Title MGRM  
Name GAUL, MARK  
Address 3405 FERNCLIFF LANE  
City-State-Zip: CLEARWATER FL 33761

Title MGRM  
Name FOSTER, DAVID  
Address 18215 CYPRESS STAND CIRCLE  
City-State-Zip: TAMPA FL 33647

*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:** ROBERT C. GOODRICH

**PRESIDENT**

**02/25/2014**

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

\_\_\_\_\_  
Date