

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000110527

Entity Name: CONNER RETREAT, LLC

Current Principal Place of Business:

1202 OXBRIDGE DR
LUTZ, FL 33549

Current Mailing Address:

1202 OXBRIDGE DR
LUTZ, FL 33549

FEI Number: 27-1332055

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORMAN, CHRISTOPHER HRDQ
HONES NORMAN HINES, P.L.
315 S HYDE PARK AVE
TAMPA, FL 33606 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	MRS.
Name	CONNER, JOHN S	Name	CONNER, MARGARET S
Address	1202 OXBRIDGE DRIVE	Address	1202 OXBRIDGE DRIVE
City-State-Zip:	LUTZ FL 33549	City-State-Zip:	LUTZ FL 33549

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: JOHN STEWART CONNER JR.

MANAGER

03/05/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date