

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000042272

Entity Name: NORTHWEST FLORIDA POURED WALLS, LLC

Current Principal Place of Business:

325 CEDAR AVENUE S. UNIT # 1
NICEVILLE, FL 32578

Current Mailing Address:

325 CEDAR AVENUE S. UNIT # 1
NICEVILLE, FL 32578 US

FEI Number: 27-2387923

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAMPBELL, SCOTT M
34990 EMERALD COAST PARKWAY
SUITE 301
DESTIN, FL 32541 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 WISE, DAVID R
Address 127 NORTH PARTIN DRIVE
City-State-Zip: NICEVILLE FL 32578

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: DAVID R. WISE

MGRM

03/22/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date