

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000046517

**Entity Name:** PACON FLORIDA, LLC

**Current Principal Place of Business:**

100 ORANGE CO CIRCLE  
WINTER HAVEN, FL 33881

**Current Mailing Address:**

POST OFFICE BOX 881  
PALOS VERDES ESTATES, CA 90274

**FEI Number:** 27-2622662

**Certificate of Status Desired:** No

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

KOLTUN, JEFFREY M  
557 NORTH WYMORE ROAD  
STE 100  
MAITLAND, FL 32751 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	Title	MGR
Name	AUSTIN, ROBERT	Name	AUSTIN, MICHAEL A
Address	POST OFFICE BOX 881	Address	POST OFFICE BOX 881
City-State-Zip:	PALOS VERDES ESTATES CA 90274	City-State-Zip:	PALOS VERDES ESATES CA 90274

*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 AUSTIN

**MEMBER**

**04/22/2016**

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

\_\_\_\_\_  
Date