

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000053478

Entity Name: VIRGINIA A. FENNER, LLC

Current Principal Place of Business:

9927 52ND STREET EAST
PARRISH, FL 34219

Current Mailing Address:

P.O.BOX 560
PARRISH, FL 34219

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FENNER, VIRGINIA A
9927 52ND STREET EAST
PARRISH, FL 34219 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 FENNER, VIRGINIA A
Address 9927 52ND STREET EAST
City-State-Zip: PARRISH FL 34219

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: VIRGINIA A FENNER

MGRM

03/28/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date