## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000082492

Entity Name: JACKSONVIEW, LLC

**Current Principal Place of Business:** 

213 E. CONCORD STREET ORLANDO. FL 32802

**Current Mailing Address:** 

P. O. BOX 1553

ORLANDO, FL 32802 US

FEI Number: 27-3274017 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHIELDS, ANN E 213 E. CONCORD STREET ORLANDO, FL 32801 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

FILED Apr 13, 2014

**Secretary of State** 

CC1364221770

## Authorized Person(s) Detail:

Title MGRM

Name ANN E. SHIELDS REVOCABLE TRUST

08/25/06

Address P. O. BOX 1553

City-State-Zip: ORLANDO FL 32802

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: ANN E. SHIELDS

Electronic Signature of Signing Authorized Person(s) Detail

**MANAGER** 

04/13/2014

Date