

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000093408

Entity Name: GAINESVILLE NO. 2, LLC

Current Principal Place of Business:

6691 SW COUNTY ROAD 158
JASPER, FL 32052

Current Mailing Address:

6691 SW COUNTY ROAD 158
JASPER, FL 32052

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLOYD, LINDA M
6691 SW COUNTY ROAD 158
JASPER, FL 32052 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 CLOYD FAMILY PARTNERSHIP, LTD
Address 6691 SW COUNTY ROAD 158
City-State-Zip: JASPER FL 32052

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 L. CLOYD

MGRM

09/11/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date