

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Feb 11, 2014
Secretary of State
CC8863758216

Entity Name: SFPC HOLDING COMPANY, LLC

Current Principal Place of Business:

2255 KILLEARN CENTER BLVD
TALLAHASSEE, FL 32309

Current Mailing Address:

2255 KILLEARN CENTER BLVD
TALLAHASSEE, FL 32309

FEI Number: 45-3014596

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PURITZ, STEVEN M
215 S MONROE ST
2ND FLOOR
TALLAHASSEE, FL 32301 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 GRAGANELLA, JAMES A
Address 2514 MILLSTONE PLANTATION ROAD
City-State-Zip: TALLAHASSEE FL 32312

Title MGRM
Name MARTIN, KEITH E
Address 6337 GLASGOW DRIVE
City-State-Zip: TALLAHASSEE FL 32312

Title MGRM
Name WELLS, BYRON H
Address 2819 FITZPATRICK DRIVE
City-State-Zip: TALLAHASSEE FL 32308

Title MGRM
Name MOCK, KRISTIE B
Address 1126 CORBY COURT EAST
City-State-Zip: TALLAHASSEE FL 32317

Title MGRM
Name WHITTAKER, CHARLES W
Address 2506 VADA ROAD
City-State-Zip: BAINBRIDGE GA 39818

Title MGRM
Name SMITH, TIMOTHY LSR
Address 1415 DOUGLAS DRIVE
City-State-Zip: BAINBRIDGE GA 39818

Title MGRM
Name POWELL, RALPH
Address 168 LANE POWELL ROAD
City-State-Zip: BRINSON GA 39825

Title MGRM
Name DOWDY, JOHN
Address 1401 DOUGLAS DRIVE
City-State-Zip: BAINBRIDGE GA 39819

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: JAMES GRAGANELLA

MGRM

02/11/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date