

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000109645

**Entity Name:** CONNEMARA FINANCE COMPANY, LLC

**Current Principal Place of Business:**

2022 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

2022 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

BLACKBURN & COMPANY, L.C.  
5150 BELFORT RD. S.  
BLDG. 500  
JACKSONVILLE, FL 32256 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, CHAIRMAN  
Name            MASON, RAYMOND K SR.  
Address        2022 HENDRICKS AVENUE  
City-State-Zip: JACKSONVILLE FL 32207

Title            PRESIDENT  
Name            MOODY, MARCY M  
Address        2022 HENDRICKS AVENUE  
City-State-Zip: JACKSONVILLE FL 32207

*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:** MARCY M. MOODY

**PRESIDENT**

**04/29/2019**

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

\_\_\_\_\_  
Date