

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000129784

Entity Name: LARSON TIMBERLANDS, LLC

Current Principal Place of Business:

ATTN: STALLWORTH M. LARSON
6845 N. OCEAN BLVD.
OCEAN RIDGE, FL 33435

Current Mailing Address:

ATTN: STALLWORTH M. LARSON
6845 N. OCEAN BLVD.
OCEAN RIDGE, FL 33435

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLASP, INC.
3001 TAMiami TRAIL NORTH
SUITE 400
NAPLES, FL 34103 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
Name LARSON, STALLWORTH M
Address 6845 N. OCEAN BLVD.
City-State-Zip: OCEAN RIDGE FL 33435

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: STALLWORTH M. LARSON

MGR

04/10/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date