

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000132289

Entity Name: 5007 LENOIR AVENUE, LLC

Current Principal Place of Business:

5007 LENOIR AVENUE
JACKSONVILLE, FL 32216

Current Mailing Address:

PO BOX 50278
JACKSONVILLE BEACH, FL 32250 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LINDROS, GARY C
5007 LENOIR AVENUE
JACKSONVILLE, FL 32216 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: GARY C LINDROS

04/22/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name LINDROS, GARY C
Address 5007 LENOIR AVENUE
City-State-Zip: JACKSONVILLE FL 32216

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: GARY LINDROS

MGR

04/22/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date