## 2018 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 32240 US

# FEI Number: APPLIED FOR

### 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

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

TitleMGRMNameLINDROS, GARY CAddress5007 LENOIR AVENUECity-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.

MGR

03/27/2018 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 27, 2018 Secretary of State CC1628176693

Certificate of Status Desired: No

03/27/2018 Date