

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000072345

**Entity Name:** WARE INVESTMENTS JAX1, LLC

**Current Principal Place of Business:**

680 PONTE VEDRA BLVD.  
PONTE VEDRA BEACH, FL 32082

**Current Mailing Address:**

3174 DESALVO ROAD  
JACKSONVILLE, FL 32246 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

HOLBROOK COLD, KATHLEEN  
ONE INDEPENDENT DRIVE  
SUITE 2301  
JACKSONVILLE, FL 32202 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                        | Title           | MGR                        |
| Name            | WARE, TIMOTHY D            | Name            | WARE, RUTH I               |
| Address         | 680 PONTE VEDRA BLVD.      | Address         | 680 PONTE VEDRA BLVD.      |
| City-State-Zip: | PONTE VEDRA BEACH FL 32082 | City-State-Zip: | PONTE VEDRA BEACH FL 32082 |

*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:** TIMOTHY D WARE

**OWNER**

**04/28/2016**

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

\_\_\_\_\_  
Date