

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000031917

**Entity Name:** 220 COCONUT, LLC.

**Current Principal Place of Business:**

213 SE COCONUT AVENUE  
STUART, FL 34996

**Current Mailing Address:**

POST OFFICE BOX 1273  
STUART, FL 34995

**FEI Number:** 46-2164145

**Certificate of Status Desired:** No

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

LEIGHTON, JOHN SIII  
213 SE COCONUT AVENUE  
STUART, FL 34996 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 MGRM  
Name LEIGHTON, JOHN SIII  
Address 213 SE COCONUT AVENUE  
City-State-Zip: STUART FL 34996

*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:** JOHN LEIGHTON

**MANAGER**

**03/19/2014**

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

\_\_\_\_\_ Date