

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000051120

**Entity Name:** WILSON/EDWARDS, LLC

**Current Principal Place of Business:**

5976 20TH STREET, SUITE 216  
VERO BEACH, FL 32966

**Current Mailing Address:**

5976 20TH STREET, SUITE 216  
VERO BEACH, FL 32966 US

**FEI Number:** 35-2473586

**Certificate of Status Desired:** No

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

EDWARDS, ROBERT C  
5976 20TH STREET  
#216  
VERO BEACH, FL 32966 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 EDWARDS, ROBERT C  
Address 5976 20TH STREET, SUITE 216  
City-State-Zip: VERO BEACH FL 32966

Title MGRM  
Name WILSON, CLAUDIA J  
Address 5976 20TH STREET, SUITE 216  
City-State-Zip: VERO BEACH FL 32966

*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:** ROBERT C EDWARDS

MGR

02/22/2015

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

\_\_\_\_\_  
Date