

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000107485

Entity Name: ANAKONDA, LLC

Current Principal Place of Business:

6350 SLATER MILL ROAD
NORTH FORT MYERS, FL 33917

Current Mailing Address:

POST OFFICE BOX 3648
NORTH FORT MYERS, FL 33918 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WINESETT, RICHARD W
2248 FIRST STREET
FORT MYERS, FL 33901 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 CARTER, KONDA
Address 21600 NALLE ROAD
City-State-Zip: NORTH FORT MYERS FL 33918

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: KONDA CARTER

MANAGER

03/19/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date