

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000112027

**Entity Name:** WESTWOOD LEE, LLC

**Current Principal Place of Business:**

575 MAXWELL STREET  
ARLINGTON, GA 39813

**Current Mailing Address:**

PO BOX 526  
ARLINGTON, GA 39813 US

**FEI Number:** 46-3824031

**Certificate of Status Desired:** No

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

SCHNITKER, CLAY A  
519 WEST BASE ST.  
MADISON, FL 32340 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:** CLAY A SCHNITKER

03/26/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	WILLIS, BRYAN	Name	CANNON, JAMES R
Address	575 MAXWELL STREET	Address	575 MAXWELL STREET
City-State-Zip:	ARLINGTON GA 39813	City-State-Zip:	ARLINGTON GA 39813
Title	MGR		
Name	GARLAND, GERALD		
Address	575 MAXWELL STREET		
City-State-Zip:	ARLINGTON GA 39813		

*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:** JAMES R. CANNON

MANAGER

03/26/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date