

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000145488

Entity Name: MARY L. WAKEMAN, P.L.

Current Principal Place of Business:

1677 MAHAN CENTER BOULEVARD
TALLAHASSEE, FL 32308

Current Mailing Address:

2625 OPEQUON BEND
TALLAHASSEE, FL 32312-7571 US

FEI Number: 46-3883364

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WAKEMAN, MARY L
1677 MAHAN CENTER BOULEVARD
TALLAHASSEE, FL 32308 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 WAKEMAN, MARY L
Address 1677 MAHAN CENTER BOULEVARD
City-State-Zip: TALLAHASSEE FL 32308

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: MARY L. WAKEMAN

MANAGER

01/11/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date