

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000003500

**Entity Name:** SHORELINE CONSTRUCTION GROUP, LLC

**Current Principal Place of Business:**

10112 BITTERN DRIVE  
PENSACOLA, FL 32507

**Current Mailing Address:**

10112 BITTERN DRIVE  
PENSACOLA, FL 32507

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

PARSONS, KENNETH  
10112 BITTERN DRIVE  
PENSACOLA, FL 32507 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                 | Title           | MGR                 |
| Name            | PARSONS, JULIE L    | Name            | PARSONS, KENNETH G  |
| Address         | 10112 BITTERN DRIVE | Address         | 10112 BITTERN DRIVE |
| City-State-Zip: | PENSACOLA FL 32507  | City-State-Zip: | PENSACOLA FL 32507  |

*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:** JULIE LYNNE PARSONS

**MGR**

**02/22/2016**

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

\_\_\_\_\_  
Date