2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 08, 2015
Secretary of State
CC0666522389

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Entity Name: LBWU, LLC

Current Principal Place of Business:

12493 GAMBLE RD.
MONTICELLO, FL 32344

Current Mailing Address:

P.O. BOX 417
WACISSA, FL 32361

FEI Number: 46-5619258

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOLAND, BETTE R
12493 GAMBLE RD.
MONTICELLO, FL 32344 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	BOLAND, BETTE R
Address	P.O. BOX 417
City-State-Zip:	WACISSA FL 32361

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: BETTE R BOLAND MGR 04/08/2015

Electronic Signature of Signing Authorized Person(s) Detail — Date