

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000100118

**Entity Name:** JANET L. SIMMONS LLC

**Current Principal Place of Business:**

58 TORENIA VERBENAS CT  
HOMOSASSA, FL 34446

**Current Mailing Address:**

58 TORENIA VERBENAS CT  
HOMOSASSA, FL 34446 US

**FEI Number:** 47-2894537

**Certificate of Status Desired:** No

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

SIMMONS, JANET L  
58 TORENIA VERBENAS CT  
HOMOSASSA, FL 34446 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	OWNER	Title	AUTHORIZED MEMBER
Name	SIMMONS, JANET LEE	Name	SIMMONS, JAKE MAXWELL
Address	58 TORENIA VERBENAS CT	Address	223 AMBURY
City-State-Zip:	HOMOSASSA FL 34446	City-State-Zip:	FORT MYERS FL 33913

*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:** JANET SIMMONS

**OWNER**

**03/08/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date