

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000105634

**Entity Name:** CASHMORE PROPERTIES FLORIDA LLC

**Current Principal Place of Business:**

1949 BROOKHAVEN DR.  
SARASOTA, FL 34239

**Current Mailing Address:**

1949 BROOKHAVEN DR.  
SARASOTA, FL 34239 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

ULRICH, SCARLETT, WICKMAN & DEAN, PA  
713 S. ORANGE AVE.,  
SUITE 201  
SARASOTA, FL 34236 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:** JOHN E. WICKMAN

04/16/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	CASHMORE, JEFFREY R	Name	CASHMORE, VIOLA B
Address	1949 BROOKHAVEN DR.	Address	1949 BROOKHAVEN DR.
City-State-Zip:	SARASOTA FL 34236	City-State-Zip:	SARASOTA FL 34239

*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:** JEFFREY R. CASHMORE

**MANAGER**

04/16/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date