

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000128331

Entity Name: JOHN W. CLEMONS LLC

Current Principal Place of Business:

6433 BUCKNELL AVE
KEYSTONE HEIGHTS, FL 32656

Current Mailing Address:

6433 BUCKNELL AVE
KEYSTONE HEIGHTS, FL 32656

FEI Number: 47-3161902

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLEMONS, JOHN W
6433 BUCKNELL AVE
KEYSTONE HEIGHTS, FL 32656 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 CLEMONS, JOHN W
Address 6433 BUCKNELL AVE
City-State-Zip: KEYSTONE HEIGHTS FL 32656

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: JOHN W. CLEMONS

MGR

03/29/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date