## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000005759

Entity Name: CHARLES SHEFFIELD LLC

**Current Principal Place of Business:** 

**7488 WREN DR** 

TALLAHASSEE. FL 32310

**Current Mailing Address:** 

**7488 WREN DR** 

TALLAHASSEE, FL 32310

FEI Number: 47-2766399 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHEFFIELD, CHARLES 7488 WREN DR TALLAHASSEE, FL 32310 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: CHARLES SHEFFIELD 04/30/2017

Electronic Signature of Registered Agent

Date

FILED Apr 30, 2017

**Secretary of State** 

CC4562804433

Authorized Person(s) Detail:

Title AMBR

Name SHEFFIELD, CHARLES

Address 7488 WREN DR

City-State-Zip: TALLAHASSEE FL 32310

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.

**AMBR** 

Electronic Signature of Signing Authorized Person(s) Detail