

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000044938

**Entity Name:** OLIVER JONES, LLC

**Current Principal Place of Business:**

730 S. LAKESIDE DRIVE  
LAKE WORTH, FL 33460

**Current Mailing Address:**

730 S. LAKESIDE DRIVE  
LAKE WORTH, FL 33460

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

HOLMES, KATHLEEN  
730 S. LAKESIDE DRIVE  
LAKE WORTH, FL 33460 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:** KATHLEEN HOLMES

02/10/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name HOLMES, KATHLEEN  
Address 730 S. LAKESIDE DRIVE  
City-State-Zip: LAKE WORTH FL 33460

Title AMBR  
Name TYRRELL, LOUIS  
Address 730 S. LAKESIDE DRIVE  
City-State-Zip: LAKE WORTH FL 33460

*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:** KATHLEEN HOLMES

MANAGER

02/10/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date