

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000079807

**Entity Name:** JDG - ST CLOUD WNM LLC

**Current Principal Place of Business:**

5150 BELFORT RD BLDG 100  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

PO BOX 551260  
JACKSONVILLE, FL 32255-1260 US

**FEI Number:** 47-3946062

**Certificate of Status Desired:** No

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

ANSBACHER & SCHNEIDER PA  
5150 BELFORT RD BLDG 100  
JACKSONVILLE, FL 32256 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 MOLLOY, SEAN A  
Address 5150 BELFORT RD BLDG 100  
City-State-Zip: JACKSONVILLE FL 32256

Title MGR  
Name MOLLOY, DANIEL A  
Address 5150 BELFORT RD BLDG 100  
City-State-Zip: JACKSONVILLE FL 32256

*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:** MOLLOY, SEAN A

MGR

04/23/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date