

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000141482

**Entity Name:** 14203 LLC

**Current Principal Place of Business:**

14203 NW 150TH AVENUE  
ALACHUA, FL 32615

**Current Mailing Address:**

POST OFFICE BOX 2047  
ALACHUA, FL 32616--2047 US

**FEI Number:** 47-4912868

**Certificate of Status Desired:** No

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

ADEL, LISA S  
151 SW 136TH STREET  
NEWBERRY, FL 32669 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	AMBR	Title	AMBR
Name	ADEL, LISA S	Name	ADEL, DOUGLAS M
Address	151 SW 136TH STREET	Address	151 SW 136TH STREET
City-State-Zip:	NEWBERRY FL 32669	City-State-Zip:	NEWBERRY FL 32669

*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:** LISA S ADEL

**MANAGER**

**01/10/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date