

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000165211

**Entity Name:** J & D MECHANICAL, LLC**Current Principal Place of Business:**5021 LUCKETT RD  
FORT MYERS, FL 33905**Current Mailing Address:**5021 LUCKETT RD  
FORT MYERS, FL 33905**FEI Number:** 47-5183949**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**KYLE, KEVIN A  
1380 ROYAL PALM SQ BLVD  
FORT MYERS, FL 33919 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            | PARKER, JAMES F     |
| Address         | 5021 LUCKETT RD     |
| City-State-Zip: | FORT MYERS FL 33905 |

|                 |                     |
|-----------------|---------------------|
| Title           | MGR                 |
| Name            | PARKER, DIANE L     |
| Address         | 5021 LUCKETT RD     |
| City-State-Zip: | FORT MYERS FL 33905 |

|                 |                     |
|-----------------|---------------------|
| Title           | PRESIDENT           |
| Name            | SCHUMAN, FRED R     |
| Address         | 5021 LUCKETT RD     |
| City-State-Zip: | FORT MYERS FL 33905 |

|                 |                     |
|-----------------|---------------------|
| Title           | VP                  |
| Name            | FARNSWORTH, NATHAN  |
| Address         | 5021 LUCKETT RD     |
| City-State-Zip: | FORT MYERS FL 33905 |

*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:** FRED SCHUMAN

PRESIDENT

04/28/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date