

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000089648

**Entity Name:** CHERYL LYNN JACOBSON LLC

**Current Principal Place of Business:**

925 HAMPTON CIRCLE  
NAPLES, FL 34105

**Current Mailing Address:**

925 HAMPTON CIRCLE  
NAPLES, FL 34105

**FEI Number: 81-2547744**

**Certificate of Status Desired: No**

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

GARIEPY, LEE  
5683 STRAND CT  
3  
NAPLES, FL 34110 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 JACOBSON, CHERYL  
Address 925 HAMPTON CIRCLE  
City-State-Zip: NAPLES FL 34105

*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: CHERYL JACOBSON** \_\_\_\_\_

**PRESIDENT**

**04/27/2017**

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date