

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000122310

**Entity Name:** CREATIVE CONCEPTS NCJ, LLC

**Current Principal Place of Business:**

4203 S. PURSLANE DR.  
HOMOSASSA, FL 34448

**Current Mailing Address:**

4203 S. PURSLANE DR.  
HOMOSASSA, FL 34448

**FEI Number: 81-3112914**

**Certificate of Status Desired:** No

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

JENKINS, NEVIN  
4203 S. PURSLANE DR.  
HOMOSASSA, FL 34448 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 PST  
Name JENKINS, NEVIN  
Address 4203 S. PURSLANE DR.  
City-State-Zip: HOMOSASSA FL 34448

*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: NEVIN JENKINS**

**MANAGEING MEMBER**

**08/07/2017**

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

\_\_\_\_\_  
Date