

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000134893

Entity Name: HWP HOME, LLC

Current Principal Place of Business:

4510 PINE RIDGE RD
NAPLES, FL 34119

Current Mailing Address:

4510 PINE RIDGE RD
NAPLES, FL 34119

FEI Number: 81-3267819

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LECHLER, PETER B
7635 BRISTOL CIR
NAPLES, FL 34120 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 SLOVA, AGRON
Address 4510 PINE RIDGE RD
City-State-Zip: NAPLES FL 34119

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: AGRON SLOVA

MGR

04/29/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date