

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000186220

**Entity Name:** 956 DIXIE BEACH LLC

**Current Principal Place of Business:**

1244 PAR VIEW DR  
SANIBEL, FL 33957

**FILED**  
**Apr 24, 2017**  
**Secretary of State**  
**CC0904651059**

**Current Mailing Address:**

1244 PAR VIEW DR  
SANIBEL, FL 33957 US

**FEI Number:** 99-9999999

**Certificate of Status Desired:** No

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

VON WOWERN, LINDA  
1244 PAR VIEW DR  
SANBEL, FL 33957 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	Title	MGR
Name	VON WOWERN, LINDA	Name	VON WOWERN, PER
Address	1244 PAR VIEW DR	Address	1244 PAR VIEW DR
City-State-Zip:	SANIBEL FL 33957	City-State-Zip:	SNIBEL FL 33957

*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:** PER VON WOWERN

MBMR

04/24/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date