

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000015763

Entity Name: W&R MECHANICAL SERVICES, LLC**Current Principal Place of Business:**5215 HIGHWAY AVE
JACKSONVILLE, FL 32254**Current Mailing Address:**5215 HIGHWAY AVE
JACKSONVILLE, FL 32254**FEI Number:** 81-5076087**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAMS, JAMES R
5515 HIGHWAY AVE
JACKSONVILLE, FL 32254 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	AMBR
Name	WILLIAMS, JAMES R
Address	12842 SWAMP OWL LANE
City-State-Zip:	JACKSONVILLE FL 32258

Title	AMBR
Name	WILLIAMS, JOHN R JR
Address	4401 SR 21
City-State-Zip:	GREEN COVE SPRINGS FL 32043

Title	MGR
Name	BRADFORD, ERIC N
Address	5215 HIGHWAY AVE
City-State-Zip:	JACKSONVILLE FL 32254

Title	MGR
Name	MURPHY, BRIAN F
Address	5215 HIGHWAY AVE
City-State-Zip:	JACKSONVILLE FL 32254

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: ERIC N. BRADFORD**CFO****04/19/2018**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date