

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000039513

Entity Name: FIVE WINDS PHOTOGRAPHY, LLC

Current Principal Place of Business:

3643 COUNTY POINTE PLACE
PALM HARBOR, FL 32683

Current Mailing Address:

3643 COUNTY POINTE PLACE
PALM HARBOR, FL 32683

FEI Number: 82-0785474

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VENTO, MICHAEL A
3643 COUNTY POINTE PLACE
PALM HARBOR, FL 32683 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 VENTO, MICHAEL A
Address 3643 COUNTY POINTE PLACE
City-State-Zip: PALM HARBOR FL 32683

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: MICHAEL VENTO

MANAGER

06/26/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date