

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000060910

**Entity Name:** W. GARDNER, LLC

**Current Principal Place of Business:**

4929 ATLANTIC BLVD  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

4929 ATLANTIC BLVD  
JACKSONVILLE, FL 32207 US

**FEI Number: 82-0930868**

**Certificate of Status Desired: Yes**

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

GARDNER, WILLIAM JR  
1523 FRASER RD  
GREEN COVE SPRINGS, FL 32043 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 OWNER  
Name GARDNER LAND DEVELOPMENT, INC  
Address 4929 ATLANTIC BLVD  
City-State-Zip: JACKSONVILLE FL 32207

Title CHAIRMAN  
Name GARDNER, WILLIAM D JR  
Address 2770 RUSSELL ROAD  
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title P  
Name JONES, ELLIOT  
Address 518 MARGARET ST  
City-State-Zip: NEPTUNE BEACH FL 32266

Title VP  
Name UNGER, THOMAS  
Address 79 MOLLIES CT  
City-State-Zip: SAINT MARYS GA 31558

*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: ELLIOT JONES**

**PRESIDENT**

**01/18/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date