

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000085715

**Entity Name:** FAUSS FAMILY ENTERPRISES, LLC

**Current Principal Place of Business:**

2011 SWEET BRIAR LANE  
JACKSONVILLE, FL 32217

**Current Mailing Address:**

2011 SWEET BRIAR LANE  
JACKSONVILLE, FL 32217

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

WATSON, JEFFREY T  
12058 SAN JOSE BOULEVARD  
SUITE 401  
JACKSONVILLE, FL 32223 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	FAUSS, STEPHEN W	Name	FAUSS, DALE E
Address	2011 SWEET BRIAR LANE	Address	449 EAST KESLEY LANE
City-State-Zip:	JACKSONVILLE FL 32217	City-State-Zip:	ST. JOHNS FL 32259

*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:** STEPHEN FAUSS

**MANAGER**

**03/19/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date