

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000204810

Entity Name: JENNIFER NILAND WRIGHT, LLC

Current Principal Place of Business:

49 CREEKSIDE DRIVE
PALM COAST, FL 32137

Current Mailing Address:

49 CREEKSIDE DRIVE
PALM COAST, FL 32137 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WRIGHT, JENNIFER
49 CREEKSIDE DRIVE
PALM COAST, FL 32137 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 WRIGHT, JENNIFER
Address 49 CREEKSIDE DRIVE
City-State-Zip: PALM COAST FL 32137

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: JENNIFER WRIGHT

MGRM

04/28/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date