

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000053643

**Entity Name:** GARY COLEMAN LLC

**Current Principal Place of Business:**

1925 FOREST BLVD  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

1925 FOREST BLVD  
JACKSONVILLE, FL 32246

**FEI Number:** 83-3181952

**Certificate of Status Desired:** No

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

MOTE, JENEICE  
6316 SAN JUAN AVE  
12  
JACKSONVILLE, FL 32210 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:** JENEICE MOTE

03/03/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name COLEMAN, GARY W  
Address 1925 FOREST BLVD  
City-State-Zip: JACKSONVILLE FL 32246

*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:** GARY COLEMAN

PRESIDENT

03/03/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date