## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000285215

Entity Name: TOMMY J JONES, LLC

## **Current Principal Place of Business:**

12871 MAGNOLIA CT. FORT MYERS, FL 33919

## **Current Mailing Address:**

8595-350 COLLEGE PKWY. FORT MYERS, FL 33919 US

## FEI Number: NOT APPLICABLE

# Name and Address of Current Registered Agent:

JONES, THOMAS F 8595-350 COLLEGE PKWY. FORT MYERS, FL 33919 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

## Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	JONES, THOMAS F	Name	JONES, RACHEL A TRUSTEE
Address	12871 MAGNOLIA CT.	Address	12871 MAGNOLIA CT.
City-State-Zip:	FORT MYERS FL 33919	City-State-Zip:	FORT MYERS FL 33919

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: THOMAS F JONES

CEO

03/17/2020 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 17, 2020 Secretary of State 4907777337CC

Date

Certificate of Status Desired: No