

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000065742

**Entity Name:** WAKEFIELD MANNING GROUP LLC**Current Principal Place of Business:**1036 DUNN AVE SUITE 4-403  
JACKSONVILLE, FL 32218**Current Mailing Address:**1036 DUNN AVE SUITE 4-403  
JACKSONVILLE, FL 32218 US**FEI Number:** 86-2209788**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WAKEFIELD MANNING, ANGELA LARICE  
1036 DUNN AVE SUITE 4-403  
JACKSONVILLE, FL 32218 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:** ANGELA LARICE WAKEFIELD MANNING

03/04/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	PRES
Name	MANNING, LEROY P III
Address	1036 DUNN AVE SUITE 4-403
City-State-Zip:	JACKSONVILLE FL 32218

Title	MGR
Name	WAKEFIELD MANNING, ANGELA
Address	1036 DUNN AVE SUITE 4-403
City-State-Zip:	JACKSONVILLE FL 32218

Title	CEO
Name	WAKEFIELD MANNING, ANGELA
Address	1036 DUNN AVE SUITE 4-403
City-State-Zip:	JACKSONVILLE FL 32218

*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:** ANGELA WAKEFIELD MANNING

CEO

03/04/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date