## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000015536

Entity Name: FEILER & LEACH, P.L.

**Current Principal Place of Business:** 

901 PONCE DE LEON BLVD., PENTHOUSE

CORAL GABLES. FL 33134-3009

**Current Mailing Address:** 

901 PONCE DE LEON BLVD., PENTHOUSE CORAL GABLES. FL 33134-3009

FEI Number: 65-1064659 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FEILER, MICHAEL BESQ. 901 PONCE DE LEON BLVD. PENTHOUSE CORAL GABLES, FL 33134-3009 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

**FILED** Apr 29, 2015

**Secretary of State** 

CC4831344597

Authorized Person(s) Detail:

Title MGRM

Title **MGRM** 

MICHAEL B. FEILER, P.A. Name MARTIN E. LEACH, P.A. Name

901 PONCE DE LEON BLVD. PH Address 901 PONCE DE LEON BLVD. PH Address

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

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.

Electronic Signature of Signing Authorized Person(s) Detail