

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038411

Entity Name: E.L.P. LLC

Current Principal Place of Business:

31629 LONG ACRES DRIVE
SUITE 1
SORRENTO, FL 32776

Current Mailing Address:

31629 LONG ACRES DRIVE
SUITE 1
SORRENTO, FL 32776

FEI Number: 57-1196633

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KEIKES, WILLIAM III
31242 SOARING HAWK LANE
SORRENTO, FL 32776 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	MR	Title	MS
Name	KEIKES, WILLIAM III	Name	KEIKES, JOANNE LOFFICER
Address	31242 SOARING HAWK LANE	Address	24926 OLMAC ROAD
City-State-Zip:	SORRENTO FL 32776	City-State-Zip:	SORRENTO FL 32776

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: JOANNE L KEIKES

TREASURER

02/19/2015

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date