# 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L05000034487

Entity Name: KELLPASSNER LLC

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

C/O KELLY, PASSIDOMO, ALBA, LLP 2390 TAMIAMI TRAIL NORTH, SUITE 204 NAPLES, FL 34103

# **Current Mailing Address:**

C/O KELLY, PASSIDOMO, ALBA, LLP 2390 TAMIAMI TRAIL NORTH, SUITE 204 NAPLES, FL 34103

# FEI Number: 20-2703429

### Name and Address of Current Registered Agent:

KELLY, CHARLES MJR. KELLY, PASSIDOMO, ALBA, LLP 2390 TAMIAMI TRAIL NORTH, SUITE 204 NAPLES, FL 34103 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 :

Authonized Person(s) Detail.				
	Title	MGR	Title	MGR
	Name	KELLY, CHARLES MJR.	Name	PASSIDOMO, KATHLEEN C
	Address	2390 TAMIAMI TRAIL NORT, STE 204	Address	2390 TAMIAMI TRAIL NORTH, STE 240
	City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103

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: CHARLES M KELLY JR

MANAGER

01/11/2017

Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 11, 2017 Secretary of State CC0714720003

Certificate of Status Desired: No