

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000037748

**Entity Name:** SADDLE FIT BY DIANE, LLC

**Current Principal Place of Business:**

9088 CHARLEE STREET  
LAKE WORTH, FL 33467

**Current Mailing Address:**

9088 CHARLEE STREET  
LAKE WORTH, FL 33467 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SASSCER, WILLIAM  
9088 CHARLEE STREET  
LAKE WORTH, FL 33467 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 MGRM  
Name SASSCER, DIANE  
Address 9088 CHARLEE STREET  
City-State-Zip: LAKE WORTH FL 33467

Title MGRM  
Name SASSCER, WILLIAM  
Address 9088 CHARLEE STREET  
City-State-Zip: LAKE WORTH FL 33467

*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:** WILLIAM SASSCER

MGRM

02/15/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date