

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000082235

Entity Name: MENNA PASCO, LLC**Current Principal Place of Business:**11115 US HWY 19 N
PORT RICHEY, FL 34668**Current Mailing Address:**PO BOX 1297
TARPON SPRINGS, FL 34688 US**FEI Number:** 20-3622603**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MENNA, MARIO
11115US HWY 19 N
PORT RICHEY, FL 34668 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:** MENNA, MARIO

04/24/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGRM
Name	MENNA, MARIO
Address	1507 ESSEX CT
City-State-Zip:	DUNEDIN FL 34698

Title	MGRM
Name	MENNA, JOHN
Address	2879 DEER HOUND WAY
City-State-Zip:	PALM HARBOR FL 34683

Title	MGRM
Name	MENNA, MARC
Address	11115 US HWY 19 N
City-State-Zip:	PORT RICHEY FL 34668

Title	MGRM
Name	MENNA, AUGUSTINO
Address	2958 KENILWICK DR
City-State-Zip:	CLEARWATER FL 33761

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: MARIO MENNA

MGRM

04/24/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date