

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000086304

Entity Name: L.S. STEINMANN, LLC

Current Principal Place of Business:

166 SE HORACE WITT WAY
LAKE CITY, FL 32025

Current Mailing Address:

166 SE HORACE WITT WAY
LAKE CITY, FL 32025

FEI Number: 20-5564269

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STUART, PATRICIA
4424 NW AMERICAN LANE SUITE 101
LAKE CITY, FL 32025 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 MGR
Name STEINMANN, LORETTA
Address 166 SE HORACE WITT WAY
City-State-Zip: LAKE CITY FL 32025

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: LORETTA S. STEINMANN

MANAGER

01/08/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date