

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000054016

**Entity Name:** MIDDLE MAN BODY PRODUCTIONS, LLC

**Current Principal Place of Business:**

8121 ROSIE'S CT.  
ESTERO, FL 33928

**Current Mailing Address:**

PO BOX 428  
ESTERO, FL 33929 US

**FEI Number: 11-3813573**

**Certificate of Status Desired:** No

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

SCARSELLA, DOMINIC A  
13616 LESINA CT.  
ESTERO, FL 33928 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 SCARSELLA, DOMINIC A  
Address 13616 LESINA CT.  
City-State-Zip: ESTERO FL 33928

*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: DOMINIC SCARSELLA**

**MGRM**

**04/27/2014**

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

\_\_\_\_\_  
Date