## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000122250

Entity Name: MINDFIRE PRESS, LLC

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

2614 VISTA COVE RD ST AUGUSTINE, FL 32084

## **Current Mailing Address:**

2614 VISTA COVE RD ST AUGUSTINE, FL 32084

# FEI Number: NOT APPLICABLE

### Name and Address of Current Registered Agent:

LEVASSEUR, ROBERT E 2614 VISTA COVE RD ST AUGUSTINE, FL 32084 US Certificate of Status Desired: Yes

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 :

	Title	MGR	Title	MGR
	Name	LEVASSEUR, ROBERT E	Name	FOX, DONNA K
	Address	2614 VISTA COVE RD	Address	2614 VISTA COVE RD
	City-State-Zip:	ST AUGUSTINE FL 32084	City-State-Zip:	ST AUGUSTINE FL 32084
	Title	MGR		
	Name	MORIN, JUDY		
	Name Address	MORIN, JUDY 26 CHICKADEE LN		

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: ROBERT E. LEVASSEUR

PRESIDENT AND REGISTERED AGENT 01/28/2018

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Jan 28, 2018 Secretary of State CC6084730373