## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000005663

Entity Name: FORCE PROTECTION SOLUTIONS, LLC

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

4304 IRIS ST. N. LAKELAND, FL 33813

# **Current Mailing Address:**

P.O. BOX 5139 LAKELAND, FL 33807 US

## FEI Number: 26-4064778

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

ALBRITTON, JEFFERY A 4304 IRIS ST. N. LAKELAND, FL 33813 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

### Authorized Person(s) Detail :

Title	MGRM
Name	ALBRITTON, JEFFERY A
Address	4304 IRIS ST. N.
City-State-Zip:	LAKELAND FL 33813

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: JEFFERY A. ALBRITTON

MGRM

02/22/2015

FILED Feb 22, 2015 Secretary of State CC2768243120

Certificate of Status Desired: No

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date