

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000008617

**Entity Name:** LORAD ASSOCIATES, LLC

**Current Principal Place of Business:**

4 TEAKWAY DRIVE  
OCALA, FL 34472

**Current Mailing Address:**

6930 HONEYSUCKLE TRAIL  
LAKEWOOD RANCH, FL 34202 US

**FEI Number:** 26-4619634

**Certificate of Status Desired:** No

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

LAVICK, CHRISTOPHER MGR  
6930 HONEYSUCKLE TRAIL  
LAKEWOOD RANCH, FL 34202 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            LAVICK, CHRISTOPHER  
Address        6930 HONEYSUCKLE TRAIL  
City-State-Zip: LAKEWOOD RANCH FL 34202

Title            MGR  
Name            LAVICK, NANCY L  
Address        6930 HONEYSUCKLE TRAIL  
City-State-Zip: LAKEWOOD RANCH FL 34202

*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:** CHRISTOPHER LAVICK

**MGR**

**02/18/2015**

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

\_\_\_\_\_  
Date