

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000071878

**Entity Name:** LONGBOAT HR SERVICES, LLC

**Current Principal Place of Business:**

5456 HOFFNER AVENUE  
SUITES 205/207  
ORLANDO, FL 32812

**Current Mailing Address:**

5456 HOFFNER AVENUE  
SUITE 207  
ORLANDO, FL 32812 US

**FEI Number:** 27-0626349

**Certificate of Status Desired:** Yes

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

AMERICAN SAFETY COUNCIL, INC.  
5125 ADANSON ST.  
SUITE 500  
ORLANDO, FL 32804 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           SOLE MEMBER  
Name           TRIMETRIX INC.  
Address        2111 WILSON BLVD  
                  SUITE 700  
City-State-Zip: ARLINGTON VA 22201

*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 J CORDES

**VICE PRESIDENT**

**04/29/2015**

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

\_\_\_\_\_  
Date