

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000076474

**Entity Name:** 1ST COMPONENT SOURCE, LLC

**Current Principal Place of Business:**

16036 RAMBLING ROAD  
ODESSA, FL 33556

**Current Mailing Address:**

16036 RAMBLING ROAD  
ODESSA, FL 33556

**FEI Number:** 27-0709446

**Certificate of Status Desired:** No

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

LYONS, GARY WESQ  
311 SOUTH MISSOURI AVENUE  
CLEARWATER, FL 33756 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	MPST	Title	VP
Name	MCMINN, MISTY D	Name	MCMINN, ROBERT CAMERON
Address	16036 RAMBLING ROAD	Address	16036 RAMBLING ROAD
City-State-Zip:	ODESSA FL 33556	City-State-Zip:	ODESSA FL 33556

*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:** MISTY DAWN MCMINN

MPST

01/12/2014

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

\_\_\_\_\_ Date