

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000078143

**Entity Name:** IDENTITY THEFT FRAUD SOLUTIONS, LLC

**Current Principal Place of Business:**

400 COLONIAL CENTER PKWY  
SUITE 120  
LAKE MARY, FL 32795

**Current Mailing Address:**

P.O. BOX 953518  
LAKE MARY, FL 32795-3518 US

**FEI Number:** 27-0776965

**Certificate of Status Desired:** No

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

CIESLAK, FRED  
400 COLONIAL CENTER PKWY  
SUITE 120  
LAKE MARY, FL 32795 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:** FRED CIESLAK

02/04/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title VP  
Name BOYER, JASON Z  
Address 7734 S E LAQUE CIRCLE  
City-State-Zip: STUART FL 34997

Title PRES  
Name CIESLAK, FRED  
Address 131 HARSTON COURT  
City-State-Zip: LAKE MARY FL 32746

*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:** FRED CIESLAK

**PRESIDENT**

02/04/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date