

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000132114

**Entity Name:** SPEAL, LLC

**Current Principal Place of Business:**

8801 MAISLIN  
TAMPA, FL 33637

**Current Mailing Address:**

8801 MAISLIN  
TAMPA, FL 33637 US

**FEI Number:** 27-4528243

**Certificate of Status Desired:** No

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

KRAUS, MICHAEL LP.A.  
400 FIFTH AVENUE SOUTH  
STE. 200  
NAPLES, FL 34102 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 MGRM  
Name POSTILL, DAVID P  
Address 24 PELICAN STREET WEST  
City-State-Zip: NAPLES FL 34113

*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:** DAVID P. POSTILL

MEMBER

02/25/2014

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

\_\_\_\_\_ Date