

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000053016

Entity Name: C4MAN, LLC

Current Principal Place of Business:

7125 IMMOKALEE RD.
KEYSTONE HEIGHTS, FL 32656

Current Mailing Address:

PO BOX 2033
SAINT AUGUSTINE, FL 32085 US

FEI Number: 45-2050796

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIEFFERMAN, CHRISTOPHER L
7125 IMMOKALEE RD.
KEYSTONE HEIGHTS, FL 32656 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 SIEFFERMAN, CHRISTOPHER L
Address 7125 IMMOKALEE RD.
City-State-Zip: KEYSTONE HEIGHTS FL 32656

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 L. SIEFFERMAN

OWNER

04/30/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date