

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000056950

Entity Name: SHAFER ESTATES, LLC

Current Principal Place of Business:

C/O NANCY J. ARCHANGEL
2977 LYNN DRIVE
WILLOUGHBY HILLS, OH 44092

Current Mailing Address:

C/O NANCY J. ARCHANGEL
2977 LYNN DRIVE
WILLOUGHBY HILLS, OH 44092 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCRORY LAW FIRM, PL
150 LAISHLEY CT, SUITE 122
PUNTA GORDA, FL 33950 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 ARCHANGEL, NANCY J
Address 2977 LYNN DRIVE
City-State-Zip: WILLOUGHBY HILLS OH 44092

Title MGRM
Name SHAFER, WILLIAM JAMES
Address C/O NANCY J ARCHANGEL, 2977 LYNN DRIVE
City-State-Zip: WILLOUGHBY HILLS OH 44092

Title MGRM
Name EBERT, KAREN A
Address 3923 MURRY HILL COURT
City-State-Zip: MURRYSVILLE PA 15668

Title MGRM
Name LACAVA, MARY LOU
Address 13744 FOX HILL DRIVE
City-State-Zip: NOVELTY OH 44072

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: NANCY ARCHANGEL

MGRM

02/14/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date