

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000061417

Entity Name: YOUR AC MAN LLC

Current Principal Place of Business:

7819 DEER FOOT DR
NEW PORT RICHEY, FL 34653

Current Mailing Address:

7819 DEER FOOT DR
NEW PORT RICHEY, FL 34653

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAVRAKIS, PATRICIA
1375 S. FT. HARRISON AVE
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 MGRM
Name MAVRAKIS, PERRY
Address 7819 DEER FOOT DR
City-State-Zip: NEW PORT RICHEY FL 34653

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: PERRY MAVRAKIS

MMGR

04/10/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date