

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000104261

**Entity Name:** CHRIS ELECTRIC SERVICES, LLC

**Current Principal Place of Business:**

4516 PORPOISE DR  
TAMPA, FL 33617

**Current Mailing Address:**

4516 PORPOISE DR  
TAMPA, FL 33617

**FEI Number:** 45-3218289

**Certificate of Status Desired:** No

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

AIKENS, EDWARD CSR  
4516 PORPOISE DRIVE  
TAMPA, FL 33617 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 P  
Name AIKENS, EDWARD C  
Address 4516 PORPOISE DRIVE  
City-State-Zip: TAMPA FL 33617

Title VP  
Name FITZROY, CHRISTOPHER JR  
Address 6204 ROLLINGHAMOCK PLACE  
City-State-Zip: TAMPA FL 33610

*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:** EDWARD C. AIKENS

**PRESIDENT**

**04/27/2015**

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

\_\_\_\_\_  
Date