

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000145168

**Entity Name:** P4S, LLC

**Current Principal Place of Business:**

507 SANDALWOOD DRIVE  
PLANT CITY, FL 33563

**Current Mailing Address:**

507 SANDALWOOD DRIVE  
PLANT CITY, FL 33563

**FEI Number:** 45-4181500

**Certificate of Status Desired:** No

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

SIMMONS, MARION C  
507 SANDALWOOD DR.  
PLANT CITY, FL 33563 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 SIMMONS, MARION C  
Address 507 SANDALWOOD DRIVE  
City-State-Zip: PLANT CITY FL 33563

*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:** MARION C. SIMMONS

MGMR

04/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date