## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000018337

Entity Name: CROSSHAIR SERVICES LLC

**Current Principal Place of Business:** 

16670 NE 46TH TERRACE CITRA, FL 32113

**Current Mailing Address:** 

16670 NE 46TH TERRACE CITRA, FL 32113 US

FEI Number: 45-4493199 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED 515 E. PARK AVENUE TALLAHASSEE, FL 32301 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: MARK WILLIAMS 04/24/2015

Electronic Signature of Registered Agent

Date

FILED Apr 24, 2015

**Secretary of State** 

CC3645363792

Authorized Person(s) Detail:

Title MEMBER Title MEMBER

Name JOHNSTON, GEORGE Name KIND-MOODY, HOWARD

Address 16670 NE 46TH TERRACE Address 3380 S.E. 2ND CT
City-State-Zip: CITRA FL 32113 City-State-Zip: OCALA FL 34471

Title PRESIDENT Title TREASURER

Name JOHNSTON, GEORGE Name JOHNSTON, GEORGE

Address 16670 NE 46TH TERRACE Address 16670 NE 46TH TERRACE

City-State-Zip: CITRA FL 32113 City-State-Zip: CITRA FL 32113

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: GEORGE JOHNSTON MGRM

Electronic Signature of Signing Authorized Person(s) Detail

04/24/2015 Date