

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000064192

**FILED**  
**Jan 10, 2017**  
**Secretary of State**  
**CC9199510898**

**Entity Name:** YAEGERS FINANCIAL SERVICES, LLC

**Current Principal Place of Business:**

2477 STICKNEY POINT ROAD STE 117B  
SARASOTA, FL 34231

**Current Mailing Address:**

2477 STICKNEY POINT ROAD STE 117B  
SARASOTA, FL 34231

**FEI Number:** 45-5420721

**Certificate of Status Desired:** No

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

COMPTON, JOHN M  
1819 MAIN STREET STE 610  
SARASOTA, FL 34236 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 MGR  
Name YAEGERS, DAVID ASR  
Address 2477 STICKNEY POINT ROAD STE 117B  
City-State-Zip: SARASOTA FL 34231

Title MGR  
Name YAEGERS, WILLIAM  
Address 2477 STICKNEY POINT ROAD STE 117B  
City-State-Zip: SARASOTA FL 34231

Title MGR  
Name YAEGERS, DAVID AJR  
Address 2477 STICKNEY POINT ROAD STE 117B  
City-State-Zip: SARASOTA FL 34231

*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:** WILLIAM YAEGERS

**MANAGER**

**01/10/2017**

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

\_\_\_\_\_  
Date