

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000119122

**Entity Name:** D MASONS SOFTWARE, LLC

**Current Principal Place of Business:**

1605 MAIN STREET  
STE 610  
SARASOTA, FL 34236

**FILED**  
**Jan 16, 2015**  
**Secretary of State**  
**CC9456988976**

**Current Mailing Address:**

1605 MAIN STREET  
STE 610  
SARASOTA, FL 34236 US

**FEI Number:** 46-1020516

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title            MGRM  
Name            MCPEAK, GLENN  
Address        1605 MAIN STREET  
                  STE 610  
City-State-Zip: SARASOTA FL 34236

Title            MGRM  
Name            IRVINE, DAVID  
Address        1605 MAIN STREET  
                  STE 610  
City-State-Zip: SARASOTA FL 34236

*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:** GLENN MCPEAK

**OWNER/MANAGER**

**01/16/2015**

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

\_\_\_\_\_  
Date