

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000132354

**Entity Name:** FLORIDA LANDLORD EVICTION SERVICE LLC

**Current Principal Place of Business:**

3125 W. HILLSBOROUGH AVE.  
TAMPA, FL 33614

**Current Mailing Address:**

3125 W. HILLSBOROUGH AVE.  
TAMPA, FL 33614

**FEI Number:** 46-1221972

**Certificate of Status Desired:** No

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

MAGNESS, LARA  
3125 W. HILLSBOROUGH AVE.  
TAMPA, FL 33614 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 MAGNESS, LARA M  
Address 3125 W. HILLSBOROUGH AVE.  
City-State-Zip: TAMPA FL 33614

Title MGR  
Name LANGE, CHRISTOPHER E  
Address 3125 W. HILLSBOROUGH AVE.  
City-State-Zip: TAMPA FL 33614

*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:** LARA MAGNESS

**OWNER**

**02/23/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date