

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000136860

**Entity Name:** SHADOW MANAGEMENT, LLC

**Current Principal Place of Business:**

9017 NW 51ST PLACE  
CORAL SPRINGS, FL 33067

**Current Mailing Address:**

9017 NW 51ST PLACE  
CORAL SPRINGS, FL 33067

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MLG SERVICES  
7284 WEST PALMETTO PARK ROAD  
SUITE 101  
BOCA RATON, FL 33433 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:** GREG GOODE

03/28/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	GOODE, GREGORY S	Name	GOODE, ROBERTA D
Address	9017 NW 51ST PLACE	Address	9017 NW 51ST PLACE
City-State-Zip:	CORAL SPRINGS FL 33067	City-State-Zip:	CORAL SPRINGS FL 33067

*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:** GREGORY GOODE

MANAGER

03/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date