## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000155161

Entity Name: MPSAPOURN LLC

**Current Principal Place of Business:** 

6004 MORGANSHIRE DRIVE SUMMERFIELD. NC 27358

## **Current Mailing Address:**

6004 MORGANSHIRE DRIVE SUMMERFIELD. NC 27358 US

FEI Number: 46-1590138 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

NICHOLAS, ELAINE S 12322 CASSOWARY LANE SPRING HILL, FL 34610 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

FILED Apr 02, 2013

**Secretary of State** 

CC6247812989

## Authorized Person(s) Detail:

Title MGR

Name SMITH, VASSILIA S

Address 6004 MORGANSHIRE DRIVE

City-State-Zip: SUMMERFIELD NC 27358

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**MANAGER** 

SIGNATURE: VASSILIA S SMITH

Electronic Signature of Signing Authorized Person(s) Detail

04/02/2013

Date