

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000043900

Entity Name: BACKLINIE BAIL BONDS LLC

Current Principal Place of Business:

15000 CITRUS COUNTRY DRIVE
320
DADE CITY, FL 33523

Current Mailing Address:

P.O. BOX 21
SAN ANTONIO, FL 33576

FEI Number: 46-2553643

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BACKLINIE, LEIGH A
15000 CITRUS COUNTRY DRIVE
320
DADE CITY, FL 33523 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 BACKLINIE, LEIGH A
Address 15000 CITRUS COUNTRY DRIVE #320

City-State-Zip: DADE CITY FL 33523

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: LEIGH BACKLINIE

MGRM

03/30/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date