

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000089700

**Entity Name:** MAN CAVE II LLC

**Current Principal Place of Business:**

1928 WYOMING AVE  
FORT PIERCE, FL 34982

**Current Mailing Address:**

5513 DAVIS STREET  
FORT PIERCE, FL 34982

**FEI Number:** 46-3168732

**Certificate of Status Desired:** No

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

SCHNEIDER, LESLIE A  
5513 DAVIS STREET  
FORT PIERCE, FL 34982 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 SCHNEIDER, MARK  
Address 5513 DAVIS STREET  
City-State-Zip: FORT PIERCE FL 34982

Title MGR  
Name SCHNEIDER, LESLIE  
Address 5513 DAVIS STREET  
City-State-Zip: FORT PIERCE FL 34982

*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:** LESLIE A. SCHNEIDER

MRS.

04/27/2017

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

\_\_\_\_\_  
Date