## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000093233

**Entity Name: SUNRISE TACTICAL SUPPLY LLC** 

**Current Principal Place of Business:** 

1000 S. DIXIE HWY W

POMPANO BEACH, FL 33060

**Current Mailing Address:** 

802 NW 84TH DRIVE

CORAL SPRINGS, FL 33071 US

FEI Number: 46-3079200 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORRISON, MICHAEL F 802 NW 84TH DRIVE CORAL SPRINGS, FL 33071 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 15, 2016

**Secretary of State** 

CC0941324444

Authorized Person(s) Detail:

Title **MGRM** Title **MEMBER** 

MORRISON, MICHAEL F MORRISON, LISA M Name Name Address 802 NW 84TH DRIVE Address 1000 S. DIXIE HWY W

**MGMBR** 

City-State-Zip: CORAL SPRINGS FL 33071 City-State-Zip: POMPANO BEACH FL 33060

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.

Electronic Signature of Signing Authorized Person(s) Detail