# 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000143970

#### Entity Name: GYPSI HAVEN LLC

## **Current Principal Place of Business:**

8409 ASHFORD PPLACE TRINITY, FL 34655

# **Current Mailing Address:**

8409 ASHFORD PLACE TRINITY, FL 34655

## FEI Number: 46-3853492

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

LEROUX, TAMI J 8409 ASHFORD PLACE TRINTIY, FL 34655 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

## Authorized Person(s) Detail :

TitleMGRMNameLEROUX, TAMI JAddress8409 ASHFORD PLACECity-State-Zip:TRINTIY FL 34655

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: TAMI LEROUX

MANAGING MEMBER

04/02/2014

Certificate of Status Desired: No

FILED Apr 02, 2014 Secretary of State CC8994772032

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date