## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000160676

Entity Name: LIDO DECK, LLC

**Current Principal Place of Business:** 

195 BAY TREE DRIVE MIRAMAR BEACH, FL 32550

**Current Mailing Address:** 

PO BOX 1227

SANTA ROSA BEACH, FL 32459

FEI Number: 32-0423577 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARLEE, DAVID E 195 BAY TREE DRIVE MIRAMAR BEACH, FL 32550 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** Feb 26, 2014

**Secretary of State** 

CC0660890691

Authorized Person(s) Detail:

Title MGRM

Title **MGRM** 

CARLEE, DAVID E Name CARLEE, GEORGIA J Name

PO BOX 1227 Address PO BOX 1227 Address

City-State-Zip: SANTA ROSA BEACH FL 32459 City-State-Zip: SANTA ROSA BEACH FL 32459

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.

02/26/2014 SIGNATURE: DAVID CARLEE **MANAGER**