## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000166870

Entity Name: SHADOW MANAGEMENT SERVICES LLC

**Current Principal Place of Business:** 

1556 ANTIGUA BAY DR ORLANDO. FL 32824

**Current Mailing Address:** 

1556 ANTIGUA BAY DR ORLANDO, FL 32824 US

FEI Number: 46-4218989 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FONTAL, DIANA 1556 ANTIGUA BAY DR ORLANDO, FL 32824 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: DIANA FONTAL 03/11/2016

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGR

Name FONTAL, DIANA

Address 1556 ANTIGUA BAY DR City-State-Zip: ORLANDO FL 32824

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: DIANA FONTAL PRESIDENT 03/11/2016

FILED Mar 11, 2016

**Secretary of State** 

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