

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000102639

**Entity Name:** SHAFFER TECH CONSULTING LLC

**Current Principal Place of Business:**

1101 SAEGER AVE  
FT PIERCE, FL 34982

**Current Mailing Address:**

1101 SAEGER AVE  
FT PIERCE, FL 34982

**FEI Number:** 47-1129320

**Certificate of Status Desired:** No

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

SHAFFER, EDWARD  
1101 SAEGER AVE  
FT 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 SHAFFER, LINDSAY  
Address 1101 SAEGER AVE  
City-State-Zip: FT PIERCE FL 34982

Title AMBR  
Name SHAFFER, EDWARD  
Address 1101 SAEGER AVE  
City-State-Zip: FT 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:** LINDSAY SHAFFER

MGR

04/30/2015

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

\_\_\_\_\_ Date