

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000105170

Entity Name: LEPRO LLC

Current Principal Place of Business:

7 CARIE WAY
VALPARAISO, FL 32580

Current Mailing Address:

7 CARIE WAY
VALPARAISO, FL 32580 US

FEI Number: 47-1223787

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LEFAVE, TIMOTHY K
7 CARIE WAY
VALPARAISO, FL 32580 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 LEFAVE, TIMOTHY K
Address 7 CARIE WAY
City-State-Zip: VALPARAISO FL 32580

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: TIMOTHY K LEFAVE

MGR

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date