

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000107947

**Entity Name:** SHAPPER CONSULTING, LLC.

**Current Principal Place of Business:**

123 OCEAN CAY WAY  
HYPOLUXO, FL 33462

**Current Mailing Address:**

123 OCEAN CAY WAY  
HYPOLUXO, FL 33462 US

**FEI Number:** 47-1283422

**Certificate of Status Desired:** Yes

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

SHAPPER, JEFFREY R  
123 OCEAN CAY WAY  
HYPOLUXO, FL 33462 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            SHAPPER, JEFFREY R  
Address        123 OCEAN CAY WAY  
City-State-Zip: HYPOLUXO FL 33462

*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:** JEFFREY R SHAPPER

MGR

04/28/2016

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

\_\_\_\_\_ Date