

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000182734

**Entity Name:** MICHAEL MCQUEEN LLC

**Current Principal Place of Business:**

8552 THOUSAND PINES CIRCLE  
ROYAL PALM BEACH, FL 33411

**Current Mailing Address:**

8552 THOUSAND PINES CIRCLE  
ROYAL PALM BEACH, FL 33411 US

**FEI Number:** 81-5061830

**Certificate of Status Desired:** No

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

DEFONTES, DEREK  
11144 WINDING PEARL WAY  
WELLINGTON, FL 33414 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 MCMASTER, MARCIE  
Address 8552 THOUSAND PINES CIRCLE  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title MANAGER  
Name DEFONTES, ERIK  
Address 8552 THOUSAND PINES CIRCLE  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title AP  
Name DEFONTES, MICHAEL  
Address 8552 THOUSAND PINES CIRCLE  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title MANAGER  
Name DEFONTES, DEREK  
Address 8552 THOUSAND PINES CIRCLE  
City-State-Zip: ROYAL PALM BEACH FL 33411

*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:** MICHAEL DEFONTES

**PARTNER**

**01/23/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date