## 2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000000893

Entity Name: SEMINOLE ADVISORY SERVICES LLC

**Current Principal Place of Business:** 

455 N. INDIAN ROCKS RD SUITE B BELLEAIR BLUFFS. FL 33770

## **Current Mailing Address:**

455 N. INDIAN ROCKS RD SUITE B BELLEAIR BLUFFS, FL 33770

FEI Number: 26-3912061 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEPPI, MYRA 516 LAKEVIEW ROAD VILLA III CLEARWATER, FL 33756 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: MYRA PEPPI 03/11/2016

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

TitleMGRTitleMANAGING MEMBERNameBANKS, ROBERT JNameCAMPBELL, RONALD J

Address 516 LAKEVIEW ROAD VILLA III Address 455 N. INDIAN ROCKS RD SUITE B
City-State-Zip: CLEARWATER FL 33756 City-State-Zip: BELLEAIR BLUFFS FL 33770

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: RONALD CAMPBELL

Electronic Signature of Signing Authorized Person(s) Detail

MANAGING MEMBER 03/11/2016

FILED Mar 11, 2016

**Secretary of State** 

CC8542959454

Date