

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1500002020

**FILED**  
**Mar 02, 2016**  
**Secretary of State**  
**CC4461201964**

**Entity Name:** UNCLAIMED PROPERTY CONSULTING & REPORTING, L.L.C.

**Current Principal Place of Business:**

89 BROWNSTONE LANE  
PALM COAST, FL 32137

**Current Mailing Address:**

89 BROWNSTONE LANE  
PALM COAST, FL 32137

**FEI Number: 45-3452393**

**Certificate of Status Desired: No**

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

HENRY, KAREN C  
89 BROWNSTONE LANE  
PALM COAST, FL 32137 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 MGRM  
Name MAYER, DANIEL P  
Address 19 TOWN SQUARE BLVD, #303  
City-State-Zip: ASHEVILLE NC 28803

Title MGRM  
Name MCGLYNN, CARLA T  
Address 41 HAMPTON DRIVE  
City-State-Zip: BERKELEY HEIGHTS NJ 07922

Title MGRM  
Name FREIMUTH, MATT  
Address 351 LICKLOG DRIVE  
City-State-Zip: HAYESVILLE NC 28904

*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: DANIEL PATRICK MAYER**

**MEMBER**

**03/02/2016**

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

\_\_\_\_\_ Date