## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012952

Entity Name: SFR-LBS, LLC

**Current Principal Place of Business:** 

32850 LAKESHORE DRIVE TAVARES, FL 32778

**Current Mailing Address:** 

P.O. BOX 1707

TAVARES. FL 32778 50

FEI Number: 60-000330 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPENCER, LINDA B 32850 LAKESHORE DR. TAVARES, FL 32778-5034 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

**FILED** Jan 26, 2014

**Secretary of State** 

CC9155500807

Authorized Person(s) Detail:

Title MGR Title MGR

SPENCER, LINDA B Name Name QUAIL, LORENE Address 32850 LAKESHORE DR Address 700 W BELFAST PL City-State-Zip: CHULUATA FL 32766 City-State-Zip: TAVARES FL 32778

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.

01/26/2014 SIGNATURE: LINDA SPENCER **MANAGER**