## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000021769

Entity Name: RAYMOND S. BULLEN LLC

**Current Principal Place of Business:** 

2510 BROSS DR ST. CLOUD, FL 34771

**Current Mailing Address:** 

P.O. BOX 700824

ST. CLOUD. FL 34770 US

FEI Number: 04-3762742 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BULLEN, RAYMOND S 3910 COUNTRYSIDE VIEW CT. ST. CLOUD, FL 34772 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 May 01, 2016

**Secretary of State** 

CC5060067684

Authorized Person(s) Detail:

Title MGRM Title

NameBULLEN, RAYMONDNameBULLEN, KIMBERELYAddressP.O. BOX 700824AddressP.O. BOX 700824City-State-Zip:ST. CLOUD FL 34770City-State-Zip:ST CLOUD FL 34770

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: RAYMOND S BULLEN

**MGRM** 

**MGRM** 

05/01/2016