

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000041899

**Entity Name:** ANTHONY'S OUTDOOR SERVICES LLC

**Current Principal Place of Business:**

7217 WASHINGTON AVE  
SOUTHPORT, FL 32409

**Current Mailing Address:**

7217 WASHINGTON AVE  
SOUTHPORT, FL 32409

**FEI Number:** 20-1195650

**Certificate of Status Desired:** No

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

CHIODO, KRISTI OWNER  
7217 WASHINGTON AVE  
SOUTHPORT, FL 32409 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 CHIODO, ANTHONY PJR  
Address 7217 WASHINGTON AVE  
City-State-Zip: SOUTHPORT FL 32409

Title MGRM  
Name CHIODO, KRISTI  
Address 7217 WASHINGTON AVE  
City-State-Zip: SOUTHPORT FL 32409

*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:** KRISTI CHIODO

MGRM

04/30/2014

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

\_\_\_\_\_ Date