## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052069

Entity Name: SADDLEBACK MANAGEMENT, LLC

**Current Principal Place of Business:** 

1756 SADDLEBACK RIDGE RD APOPKA, FL 32703

**Current Mailing Address:** 

1756 SADDLEBACK RIDGE RD APOPKA. FL 32703 US

FEI Number: 41-2174192 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANSON, LAURA 1756 SADDLEBACK RIDGE RD APOPKA, FL 32703 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: LAURA ANSON 03/16/2017

Electronic Signature of Registered Agent

Date

FILED Mar 16, 2017

**Secretary of State** 

CC7587999418

## Authorized Person(s) Detail:

Title MGRM

Name ANSON, LAURA Address 17500 SW 186 WAY

City-State-Zip: RENTON WA 98058-9542

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: LAURA ANSON PRES 03/16/2017