

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000050462

**Entity Name:** TOP SHELF HOME INSPECTIONS, L.L.C.

**Current Principal Place of Business:**

4627 COLUMBUS WAY SOUTH  
ST. PETERSBURG, FL 33712

**Current Mailing Address:**

4627 COLUMBUS WAY SOUTH  
ST. PETERSBURG, FL 33712

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MCLEOD, PHILIP AESQ  
540-4TH STREET NORTH  
ST. PETERSBURG, FL 33701 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 WEIR, DAN  
Address 4627 COLUMBUS WAY SOUTH  
City-State-Zip: ST. PETERSBURG FL 33712

*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:** DAN WEIR

**MANAGER**

**01/21/2015**

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

\_\_\_\_\_  
Date