

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000104239

**Entity Name:** PELICAN PRESSURE CLEANING, LLC

**Current Principal Place of Business:**

6281 WESTPORT LANE  
NAPLES, FL 34116

**Current Mailing Address:**

PO BOX 990958  
NAPLES, FL 34117 US

**FEI Number:** 20-3679801

**Certificate of Status Desired:** No

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

WILLIAMS, BRUCE  
6281 WESTPORT LANE  
NAPLES, FL 34116 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                | Title           | SECRETARY        |
| Name            | WILLIAMS, BRUCE     | Name            | BLANCO, JEAN     |
| Address         | 6281 WESTPORT LANE  | Address         | 1191 16TH AVE SW |
| City-State-Zip: | NAPLES FL 34116     | City-State-Zip: | NAPLES FL 34117  |
|                 |                     |                 |                  |
| Title           | ASST. SECRETARY     |                 |                  |
| Name            | GAUTHIER, CHRISTIAN |                 |                  |
| Address         | 710 29TH ST SW      |                 |                  |
| City-State-Zip: | NAPLES FL 34117     |                 |                  |

*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:** BRUCE WILLIAMS

MGRM

02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date