

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000002799

**Entity Name:** ROBERT AIKEN SULLIVAN, LLC

**Current Principal Place of Business:**

5960 SE 60TH STREET  
TRENTON, FL 32693

**Current Mailing Address:**

POST OFFICE BOX 871  
TRENTON, FL 32693 US

**FEI Number:** 20-4215756

**Certificate of Status Desired:** No

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

SULLIVAN, ROBERT A  
5960 SE 60 STREET  
TRENTON, FL 32693 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 SULLIVAN, ROBERT A  
Address 5960 SE 60TH STREET  
City-State-Zip: TRENTON FL 32693

*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:** ROBERT SULLIVAN

OWNER

03/30/2015

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

\_\_\_\_\_ Date