

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000010940

**Entity Name:** ELLIOT P. MAIER, LLC

**Current Principal Place of Business:**

6158 LINNEAL BEACH DR.  
APOPKA, FL 32703

**Current Mailing Address:**

6158 LINNEAL BEACH DR.  
APOPKA, FL 32703

**FEI Number:** 20-4223868

**Certificate of Status Desired:** Yes

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

MAIER, ELLIOT P  
6158 LINNEAL BEACH DR.  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	PRESIDENT	Title	VP
Name	MAIER, ELLIOT P	Name	MAIER, LISA M
Address	6158 LINNEAL BEACH DR.	Address	6158 LINNEAL BEACH DR.
City-State-Zip:	APOPKA FL 32703	City-State-Zip:	APOPKA FL 32703

*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:** LISA M MAIER

VP

04/29/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date