

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000020957

**Entity Name:** RMA OF PORT ST. LUCIE, LLC

**Current Principal Place of Business:**

1790 SW ST. LUCIE WEST BLVD  
PORT ST. LUCIE, FL 34986

**Current Mailing Address:**

206 SW PARISH TER  
PORT ST. LUCIE, FL 34984

**FEI Number:** 86-1160601

**Certificate of Status Desired:** No

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

ALLEN PROPERTIES, LLC  
206 SW PARISH TER  
PORT ST. LUCIE, FL 34984 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            PRES  
Name            ALLEN, MICHAEL A  
Address        206 SW PARISH TER  
City-State-Zip: PORT ST. LUCIE FL 34984

*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:** MICHAEL ALLEN

**MANAGING MEMBER**

**01/09/2015**

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

\_\_\_\_\_ Date