

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000077579

**Entity Name:** NEVILLE L. DALEY AND COMPANY LLC

**Current Principal Place of Business:**

6839 SW 20TH STREET  
MIRAMAR, FL 33023

**Current Mailing Address:**

6839 SW 20TH STREET  
MIRAMAR, FL 33023 US

**FEI Number:** 98-0623981

**Certificate of Status Desired:** No

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

DALEY, LLOYD  
3839 SW 20TH STREET  
MIRAMAR, FL 33023 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 DALEY, LLOYD  
Address 6839 SW 20TH STREET  
City-State-Zip: MIRAMAR FL 33023

Title MGRM  
Name DALEY, PATRICIA  
Address 6839 SW 20TH STREET  
City-State-Zip: MIRAMAR FL 33023

Title MGR  
Name DALEY, RAEJEANNE  
Address 6839 SW 20TH STREET  
City-State-Zip: MIRAMAR FL 33023

Title MGR  
Name DALEY, RICHARD  
Address 6839 SW 20TH STREET  
City-State-Zip: MIRAMAR FL 33023

Title MGR  
Name DALEY, ROHANNA  
Address 6839 SW 20TH STREET  
City-State-Zip: MIRAMAR FL 33023

*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:** LLOYD DALEY

MANAGER

04/21/2014

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

\_\_\_\_\_  
Date