## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000053125

Entity Name: SECURE PRO, LLC

**Current Principal Place of Business:** 

3018 N US HWY 301 1000

TAMPA, FL 33619

**Current Mailing Address:** 

3018 N US HWY 301 1000

TAMPA, FL 33619 US

FEI Number: 27-2634561 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BAUER, SCOTT A 3018 N US HWY 301 1000 TAMPA, FL 33619 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

**FILED** Mar 25, 2018

**Secretary of State** 

CC9465426137

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

Name PULLARA, WILLIAM Name BAUER, SCOTT A

3018 N US HWY 301 3018 N US HWY 301 Address Address 1000 1000

City-State-Zip: **TAMPA FL 33619** City-State-Zip: **TAMPA FL 33619** 

Title **MGRM** Title **MGRM** 

Name ROTH, DAVID E Name HOWELL, KEITH

Address 3018 N US HWY 301 Address 3018 N US HWY 301

1000 1000

City-State-Zip: **TAMPA FL 33619** City-State-Zip: **TAMPA FL 33619** 

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.

03/25/2018 SIGNATURE: DAVID ROTH MANAGING PARTNER