## 2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L12000076434

**Entity Name: RITEAIRE MARINE LLC** 

**Current Principal Place of Business:** 

24010 C 28TH AVENUE NORTH ST. PETERSBURG, FL 33713

**Current Mailing Address:** 

PO BOX C

MICHIGAN CITY. IN 46361 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 3030 N. ROCKY POINT DR. STE. 150A

TAMPA, FL 33607 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: DAN KEEN 12/21/2015

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

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

REESE. THEODORE Name Name ESCARDO, HECTOR

Address 11299 BIENVENIDA WAY #202 Address 2401 C 28TH AVENUE NORTH ST. PETERSBURG FL 33713 City-State-Zip:

City-State-Zip: FORT MYERS FL 33908

Title **MEMBER** 

Name REESE, LAURIE B.

Address 4979 SW 186TH AVENUE

SIGNATURE: THEODORE REESE

City-State-Zip: SOUTHWEST RANCHES FL 33332

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.

Electronic Signature of Signing Authorized Person(s) Detail

**MEMBER** 

12/21/2015

**FILED** Dec 21, 2015

**Secretary of State** 

CC2907900897

Date