

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000011200

**Entity Name:** SAUCEMAN PLUMBING LLC

**Current Principal Place of Business:**

203 WOODHILLS CT.  
ORANGE CITY, FL 32763

**Current Mailing Address:**

203 WOODHILLS CT.  
ORANGE CITY, FL 32763 UN

**FEI Number:** 46-1833310

**Certificate of Status Desired:** No

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

SAUCEMAN, THOMAS J  
203 WOODHILLS CT.  
ORANGE CITY, FL 32763 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 MGR  
Name SAUCEMAN, THOMAS J  
Address 203 WOODHILLS CT.  
City-State-Zip: ORANGE CITY FL 32763

Title MGRM  
Name SAUCEMAN, THOMAS D  
Address 5348 CORDGRASS BEND  
City-State-Zip: PORT ORANGE FL 32128

*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:** THOMAS SAUCEMAN

**OWNER**

**04/23/2015**

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

\_\_\_\_\_  
Date