

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000079197

**Entity Name:** ERPS LLC

**Current Principal Place of Business:**

15880 SUMMERLIN RD  
SUITE #300 BOX #400  
FORT MYERS, FL 33908

**Current Mailing Address:**

15880 SUMMERLIN RD  
SUITE #300 BOX #400  
FORT MYERS, FL 33908 US

**FEI Number:** 80-0931459

**Certificate of Status Desired:** No

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

FAUGHT, KARI  
15880 SUMMERLIN RD  
SUITE #300 BOX #400  
FORT MYERS, FL 33908 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:** KARI FAUGHT

02/02/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name SAUNDERS, GLENN R  
Address 15880 SUMMERLIN RD  
SUITE #300 BOX #400  
City-State-Zip: FORT MYERS FL 33908

Title MGR  
Name SAUNDERS, GLENN  
Address 15880 SUMMERLIN RD  
SUITE #300 BOX #400  
City-State-Zip: FORT MYERS FL 33908

Title MBR  
Name SAUNDERS, RACHAELL  
Address 15880 SUMMERLIN RD  
SUITE #300 BOX #400  
City-State-Zip: FORT MYERS FL 33908

*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:** GLENN SAUNDERS

MGMR

02/02/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date