#### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000100362

Entity Name: CAPITAL PROTECTION AND INVESTIGATIONS L.L.C.

**FILED** Feb 22, 2015 **Secretary of State** CC7400666488

## **Current Principal Place of Business:**

4557 TUSCANA DRIVE SARASOTA, FL 34241

## **Current Mailing Address:**

P.O. BOX 15961

SARASOTA, FL 34277

FEI Number: 46-3253920 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

FRASSETTI, MICHAEL S 4557 TUSCANA DRIVE SARASOTA, FL 34241 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 **INVESTIGATOR** 

Name FRASSETTI, MICHAEL Address 4557 TUSCANA DRIVE City-State-Zip: SARASOTA FL 34241

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: MICHAEL FRASSETTI

Electronic Signature of Signing Authorized Person(s) Detail

02/22/2015 **OWNER** 

Date