## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000171430

Entity Name: ABSOLUTE FC, LLC

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

657 GADSON ST SUITE 300 GROVELAND, FL 34736

**Current Mailing Address:** 

657 GADSON ST SUITE 300 GROVELAND, FL 34736

FEI Number: 46-4299877 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTIN, BRAD S 1707 CHICKADEE WAY CLERMONT, FL 34736 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** Apr 01, 2015

**Secretary of State** 

CC5768503472

Authorized Person(s) Detail:

Title MRG Title **MGR** 

MARTIN, BRAD S Name Name SPARKS, JOHN E 1707 CHICKADEE WAY Address Address 9919 JANETTE LANE City-State-Zip: CLERMONT FL 34711 City-State-Zip: CLERMONT FL 34711

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.

**MRG** 

Electronic Signature of Signing Authorized Person(s) Detail