

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000104787

**Entity Name:** RODRIGUEZ BASEBALL CLINICS, L.L.C.

**Current Principal Place of Business:**

10000 KERSEY ST #10323  
DAVENPORT, FL 33897-9610

**Current Mailing Address:**

10000 KERSEY ST #10323  
DAVENPORT, FL 33897-9610

**FEI Number:** 47-2747590

**Certificate of Status Desired:** No

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

RODRIGUEZ, ANTHONY  
10000 KERSEY ST #10323  
DAVENPORT, FL 33897-9610 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 RODRIGUEZ, CARLOS JR  
Address 3100 KERSEY ST #3214  
City-State-Zip: DAVENPORT FL 33897

Title MGR  
Name RODRIGUEZ, ANTHONY  
Address 10000 KERSEY ST #10323  
City-State-Zip: DAVENPORT FL 33897-9610

*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:** ANTHONY RODRIGUEZ

MGR

03/01/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date