#### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000114821

**Entity Name: CLERMONT FINANCIAL CENTER LLC** 

FILED
Apr 30, 2015
Secretary of State
CC2935446710

# **Current Principal Place of Business:**

1795 E HWY 50 SUITE A

CLERMONT, FL 34711

## **Current Mailing Address:**

P O BOX 780

CEDAR KEY, FL 32625 US

FEI Number: 47-3872846 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SANDERS, FAYE S 12416 STATE ROAD 24 CEDAR KEY, FL 32625 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.

Title

**AMBR** 

SIGNATURE:

Electronic Signature of Registered Agent

Date

#### Authorized Person(s) Detail:

Title AMBR

Name KRAUS, BRIAN K Name SANDERS, FAYE
Address 1795 E HWY 50, STE A Address P O BOX 780

City-State-Zip: CLERMONT FL 34711 City-State-Zip: CEDAR KEY FL 32625

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.