## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000116740

Entity Name: NATIONAL ASSOCIATION OF SECURITY PROFESSIONALS

L.L.C

**Current Principal Place of Business:** 

214 LAKEVIEW AVE. SANFORD, FL 32771

**Current Mailing Address:** 

**PO BOX 615** 

LAKE MONROE, FL 32747 US

FEI Number: 47-1442522 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KENNEDY, LUCAS S 214 LAKEVIEW AVE. SANFORD, FL 32771 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 23, 2015

**Secretary of State** 

CC5945844238

## Authorized Person(s) Detail:

Name KENNEDY, LUCAS S Address 214 LAKEVIEW AVE City-State-Zip: SANFORD FL 32771

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: LUCAS KENNEDY

Electronic Signature of Signing Authorized Person(s) Detail

**OWNER** 

04/23/2015