

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000139501

**Entity Name:** MICHAEL DAVID SHAFFER, LLC

**Current Principal Place of Business:**

40 LANSING COURT  
ST AUGUSTINE, FL 32092-1869

**Current Mailing Address:**

40 LANSING COURT  
ST AUGUSTINE, FL 32092-1869 US

**FEI Number:** 47-1795570

**Certificate of Status Desired:** Yes

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

SHAFFER, MICHAEL D  
40 LANSING COURT  
ST AUGUSTINE, FL 32092-1869 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 AMBR  
Name SHAFFER, MICHAEL D  
Address 40 LANSING COURT  
City-State-Zip: ST AUGUSTINE FL 32092-1869

Title AMBR  
Name SHAFFER, PATRICIA S  
Address 40 LANSING COURT  
City-State-Zip: ST AUGUSTINE FL 32092-1869

*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 D. SHAFFER

AMBR

03/23/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date