

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000187342

Entity Name: YOGI LIAR LLC**Current Principal Place of Business:**135 WEST STETSON AVENUE
DELAND, FL 32720**Current Mailing Address:**410 DAYTON BLVD
WEST MELBOURNE, FL 32904**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUBLITZ, JEFF L
410 DAYTON BLVD
WEST MELBOURNE, FL 32904 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 PRES
Name BUBLITZ, JEFF L
Address 410 DAYTON BLVD
City-State-Zip: WEST MELBOURNE FL 32904

Title AMBR
Name BUBLITZ, JON W
Address 7850 LIME GROVE AVENUE
City-State-Zip: WEST MELBOURNE FL 32904

Title SEC
Name BUBLITZ, SUSI N
Address 135 WEST STETSON AVENUE
City-State-Zip: DELAND FL 32720

Title MGR
Name BUBLITZ, LAURI V
Address 410 DAYTON BLVD
City-State-Zip: WEST MELBOURNE FL 32904

Title AP
Name BUBLITZ, JASON J
Address 403 JOYCE AVENUE
City-State-Zip: TEMPLE TERRACE FL 33617

Title SEC
Name BUBLITZ, SABRINA A
Address 410 DAYTON BLVD
City-State-Zip: WEST MELBOURNE FL 32904

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: JEFF L BUBLITZ**PRESIDENT****01/09/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date