

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000131876

**Entity Name:** LEMASTERS GROUP CONSULTING & SERVICES, LLC

**Current Principal Place of Business:**

113 BROOKS ST SE  
SUITE 206  
FORT WALTON BEACH, FL 32548

**Current Mailing Address:**

P.O. BOX 4283  
FWB, FL 32549 US

**FEI Number:** 81-3525755

**Certificate of Status Desired:** Yes

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

LEMASTERS, JEFFREY S SR.  
113 BROOKS ST SE  
SUITE 206  
FORT WALTON BEACH, FL 32548 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 LEMASTERS, JEFFREY S SR.  
Address 113 BROOKS ST SE  
SUITE 206  
City-State-Zip: FORT WALTON BEACH FL 32548

Title AR  
Name LEMASTERS, MARYELLEN  
Address 2249 CLIPPER WAY  
City-State-Zip: NAPLES FL 34104

*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:** JEFFREY S. LEMASTERS

**CEO**

**06/08/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date