

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000174366

**Entity Name:** SECURED ROOFING AND RESTORATION, LLC

**Current Principal Place of Business:**

483 MONTGOMERY ROAD  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

483 MONTGOMERY ROAD  
ALTAMONTE SPRINGS, FL 32714 US

**FEI Number:** 82-2490623

**Certificate of Status Desired:** No

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

RICHARDS, LUARA H  
189 S. ORANGE AVE.  
SUITE 850 SOUTH  
ORLANDO, FL 32801 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                        | Title           | MGR                        |
| Name            | FROTSON, LLOYD             | Name            | AULLS, ERNEST C III        |
| Address         | 483 MONTGOMERY ROAD        | Address         | 483 MONTGOMERY ROAD        |
| City-State-Zip: | ALTAMONTE SPRINGS FL 32714 | City-State-Zip: | ALTAMONTE SPRINGS FL 32714 |

*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:** ERNEST C AULLS III

**MANAGER**

**04/14/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date