

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000024591

**Entity Name:** DEFENSE SIMULATIONS LLC

**Current Principal Place of Business:**

1461 KASTNER PLACE  
101  
SANFORD, FL 32771

**Current Mailing Address:**

1461 KASTNER PLACE  
101  
SANFORD, FL 32771 US

**FEI Number:** 82-4177306

**Certificate of Status Desired:** No

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

BOBES, BARRY  
673 SAUSALITO BLVD  
CASSELBERRY, FL 32707 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 BOBES, BARRY  
Address 1461 KASTNER PLACE  
101  
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:** BARRY BOBES

**MANAGER**

**01/05/2020**

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

\_\_\_\_\_  
Date