2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000009409

Entity Name: LIMBITLESS SOLUTIONS INC

Current Principal Place of Business:

4365 ANDRMEDA LOOP N STE 360

ORLANDO, FL 32816

Current Mailing Address:

4365 ANDRMEDA LOOP N STE 360 ORLANDO, FL 32816 US

FEI Number: 47-1944657 Certificate of Status Desired: No

FILED Apr 13, 2017

Secretary of State

CC5908025058

Date

Date

Name and Address of Current Registered Agent:

COLE, W. SCOTT 4365 ANDRMEDA LOOP N STE 360 ORLANDO, FL 32816 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: NATHANAEL JONES 04/13/2017

City-State-Zip:

Title

ORLANDO FL 32827

Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title CHAIRMAN

MANERO, ALBERT Name Name GERMAN, DEBORAH DR. Address 12603 CREST SPRINGS LANE Address 6850 LAKE NONA BLVD

#1423

City-State-Zip: ORLANDO FL 32828 VΡ

BOARD MEMBER Title Name SPARKMAN, JOHN

Name COURBIN, DOMINIQUE Address 368 INNISBROOK LANE

289 SAWYERWOOD PLACE Address

WINTER SPRINGS FL 32708 City-State-Zip: OVIEDO FL 32765 City-State-Zip:

Title **BOARD MEMBER** Title **TREASURER**

Name JACKSON, DALE JONES, NATHANAEL Name

Address 1034 KERWOOD CIRCLE 12424 RESEARCH PARKWAY Address

City-State-Zip: OVIEDO FL 32765 SUITE 300

ORLANDO FL 32826

City-State-Zip: Title **BOARD MEMBER**

BOARD MEMBER Name GEORGIOPOULOS, MICHAEL DR. Title

4328 SCORPIUS STREET Address Name HAWLEY, MICHELLE

4040 NEW BROAD CIRCLE City-State-Zip: ORLANDO FL 32816-2993 Address

APT.302

City-State-Zip: OVIEDO FL 32765 Continues on page 2

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

04/13/2017 TREASURER SIGNATURE: NATHANAEL JONES

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued:

TitleBOARD MEMBERTitleBOARD MEMBERNameWALSH, DAVIDNameCLARK, TRACY

Address 400 COLONIAL CENTER Address 12424 RESEARCH PARKWAY

SUITE 400 SUITE 300

City-State-Zip: LAKE MARY FL 32746 City-State-Zip: ORLANDO FL 32826

TitleSECRETARYTitleBOARD MEMBERNameALCALA, TERANameJONES, BRENDAN

Address 12424 RESEARCH PARKWAY Address 302 MORNING CREEK CIRCLE

SUITE 300 City-State-Zip: APOPKA FL 32712

City-State-Zip: ORLANDO FL 32826