

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000071454

**Entity Name:** ANN BOLGER CATES, P.T., LLC

**Current Principal Place of Business:**

121 GABRIEL CIRCLE  
#7  
NAPLES, FL 34104

**Current Mailing Address:**

121 GABRIEL CIRCLE  
#7  
NAPLES, FL 34104

**FEI Number:** 20-5274964

**Certificate of Status Desired:** No

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

JCK ACCOUNTING SERVICES  
5683 STRAND CT.  
SUITE 7  
NAPLES, FL 34110 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 P  
Name CATES, ANN B  
Address 121 GABRIEL CIRCLE #7  
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:** ANN B. CATES

04/07/2014

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

\_\_\_\_\_  
Date