

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000026533

Entity Name: ROSARIO'S DAY CARE CENTER LLC

Current Principal Place of Business:

17278 SW 36TH AVENUE RD
OCALA, FL 34473

Current Mailing Address:

17278 SW 36TH AVENUE RD
OCALA, FL 34473

FEI Number: 20-8607948

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSARIO, MARIA
17278 SW 36TH AVENUE RD
OCALA, FL 34473 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 MGRM
Name ROSARIO, MARIA
Address 17278 SW 36TH AVENUE RD
City-State-Zip: Ocala FL 34473

Title MANAGER
Name ROSARIO, DANNY
Address 2160 SW 158TH ST RD
City-State-Zip: Ocala FL 34473

Title MANAGER
Name LEBRON, CYNTHIA
Address 17278 SW 36TH AVENUE RD
City-State-Zip: Ocala FL 34473

Title MANAGER
Name LEBRON, WILLIAM
Address 17278 SW 36TH AVENUE RD
City-State-Zip: Ocala FL 34473

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: MARIA ROSARIO

MANAGER

03/31/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date