

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000015515

Entity Name: ANOINTED COMPANION LLC

Current Principal Place of Business:

3449 DOREEN DR
LAKELAND, FL 33810

Current Mailing Address:

P O BOX 91862
LAKELAND, FL 33804 US

FEI Number: 26-1961080

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIDA D LIVINGSTON
3449 DOREEN DR
LAKELAND, FL 33810 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 LIVINGSTON, LIDA D
Address 3449 DOREEN DR
City-State-Zip: LAKELAND FL 33810-2926

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: LIDA D. LIVINGSTON

MGRM

04/22/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date