

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000030632

Entity Name: CENTRAL FLORIDA BIOFEEDBACK LLC

Current Principal Place of Business:

1612 TOWN PLAZA COURT
WINTER SPRINGS, FL 32708

Current Mailing Address:

3318 BUFFAM PLACE
CASSELBERRY, FL 32707

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LADD, KELLY JOY
3318 BUFFAM PL
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 SANCHEZ, ALEJANDRO A
Address 3318 BUFFAM PL
City-State-Zip: CASSELBERRY FL 32707

Title MGRM
Name LADD, KELLY JOY
Address 3318 BUFFAM PLACE
City-State-Zip: CASSELBERRY FL 32707

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: ALEJANDRO SANCHEZ

OWNER

01/12/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date