

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000056404

**Entity Name:** A DOG'S DREAM DAYCARE, LLC

**Current Principal Place of Business:**

2430 SHADOWLAWN DR. STE 12  
NAPLES, FL 34112

**Current Mailing Address:**

2430 SHADOWLAWN DR. STE 12  
NAPLES, FL 34112 US

**FEI Number:** 26-2847615

**Certificate of Status Desired:** No

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

SCHAUS, JILL  
2430 SHADOWLAWN DR. STE 12  
NAPLES, FL 34112 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            CEO  
Name            SCHAUS, JILL  
Address        2430 SHADOWLAWN DR. STE 12  
City-State-Zip:    NAPLES FL 34112

Title            MANAGER  
Name            SCHAUS, TIM W  
Address        2430 SHADOWLAWN DR. STE 12  
City-State-Zip:    NAPLES FL 34112

*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:** JILL SCHAUS

CEO

02/27/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date