## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000018295

Entity Name: JAX MEDIATION CENTER, LLC

**FILED** Apr 04, 2019 **Secretary of State** 3803107136CC

## **Current Principal Place of Business:**

2700 UNIVERSITY BLVD WEST, STE, A-1 JACKSONVILLE, FL 32217

## **Current Mailing Address:**

2700-C UNIVERSITY BLVD. W. JACKSONVILLE, FL 32217

FEI Number: 80-0359331 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SCHUTT, DENNIS R 2700 UNIVERSITY BLVD WEST, STE. A1 JACKSONVILLE, FL 32217 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

Title **MGRM** 

SCHUTT, DENNIS R Name SCHMIDT, PENNY W Name

2700 UNIVERSITY BLVD WEST, STE. Address Address 2700 UNIVERSITY BLVD WEST, STE.

City-State-Zip: JACKSONVILLE FL 32217 City-State-Zip: JACKSONVILLE FL 32217

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: DENNIS R. SCHUTT

Electronic Signature of Signing Authorized Person(s) Detail

**MGMR** 

04/04/2019