

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000032946

Entity Name: AMERICA CPR TRAINING, LLC.

Current Principal Place of Business:

1760 SHADOWOOD LANE
400-A
JACKSONVILLE, FL 32207

Current Mailing Address:

1760 SHADOWOOD LANE
400-A
JACKSONVILLE, FL 32207 US

FEI Number: 82-1483999

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAGEE, PORSHA
1760 SHADOWOOD LANE
400-A
JACKSONVILLE, FL 32207 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: PORSHA MAGEE

04/30/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name MAGEE, PORSHA
Address 1760 SHADOWOOD LANE
 400-A
City-State-Zip: JACKSONVILLE FL 32207

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: PORSHA MAGEE

MANAGER

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date