

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000000398

Entity Name: CONTINENTAL FINANCIAL SERVICES, LLC

Current Principal Place of Business:

3357 ROYAL PALM DR
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

PO BOX 551712
JACKSONVILLE, FL 32255

FEI Number: 27-1594749

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PIERCE, WILLIAM E
3357 ROYAL PALM DR
JACKSONVILLE, FL 32250 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	Title	MGRM
Name	STURMS, MICHAEL L	Name	PIERCE, WILLIAM E
Address	PO BOX 551712	Address	3357 ROYAL PALM DR
City-State-Zip:	JACKSONVILLE FL 32255	City-State-Zip:	JACKSONVILLE BEACH FL 32250

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: WILLIAM E PIERCE

MANAGING MEMBER

04/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date