

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000003809

**Entity Name:** GTD SCIENCES, LLC

**Current Principal Place of Business:**

478 E ALTAMONTE DR  
#108-261  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

478 E ALTAMONTE DR  
#108-261  
ALTAMONTE SPRINGS, FL 32701 US

**FEI Number:** 27-2145317

**Certificate of Status Desired:** No

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

DOSWELL, GARY T  
478 E ALTAMONTE DR  
#108-261  
ALTAMONTE SPRINGS, FL 32701 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            DOSWELL, GARY T  
Address        550 CRANES WAY #218  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title            AUTHORIZED MEMBER  
Name            MODESITT, ELISE TERRY  
Address        478 E ALTAMONTE DR  
                  #108-261  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

*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:** GARY T DOSWELL

**MANAGER**

**04/24/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date