

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000010360

**Entity Name:** SCI LUCAS ANTHONY, LLC

**Current Principal Place of Business:**

6900 S. ORANGE BLOSSOM TRAIL #432  
ORLANDO, FL 32809

**Current Mailing Address:**

6900 S. ORANGE BLOSSOM TRAIL #432  
ORLANDO, FL 32809

**FEI Number:** 42-1770419

**Certificate of Status Desired:** No

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

MINEOLA CONSULTING, INC.  
6900 S. ORANGE BLOSSOM TRAIL #432  
ORLANDO, FL 32809 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  
Name TINELLI, VALERIE  
Address 6900 S. ORANGE BLOSSOM TRAIL #432  
City-State-Zip: ORLANDO FL 32809

Title MGRM  
Name TINELLI, ANNE  
Address 6900 S. ORANGE BLOSSOM TRAIL #432  
City-State-Zip: ORLANDO FL 32809

Title MGRM  
Name TINELLI, ALAIN  
Address 6900 S. ORANGE BLOSSOM TRAIL #432  
City-State-Zip: ORLANDO FL 32809

*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:** TINELLI , ALAIN

MGR

01/24/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date