## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000056556

Entity Name: SHARON THOMAS CONSULTING, LLC

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

18 N. SHINE AVENUE ORLANDO, FL 32801

# **Current Mailing Address:**

**18 N. SHINE AVENUE** ORLANDO, FL 32801

# FEI Number: NOT APPLICABLE

### Name and Address of Current Registered Agent:

THOMAS, SHARON L 18 N. SHINE AVENUE ORLANDO, FL 32801 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

### Authorized Person(s) Detail :

Title	MGRM
Name	THOMAS, SHARON L
Address	18 N. SHINE AVENUE
City-State-Zip:	ORLANDO FL 32801

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: SHARON L. THOMAS

MANAGER

04/08/2014

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

# FILED Apr 08, 2014 Secretary of State CC2326670820

Date