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: DAVY SANDERS

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

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	Title	MGR
Name	SANDERS, DAVY	Name	SANDERS, LAMAR
Address	421 WILLIAMS DITCH RD	Address	421 WILLIAMS DITCH RD
City-State-Zip:	CANTONMENT FL 32533	City-State-Zip:	CANTONMENT FL 32533
Title	MGR		
Name	SIMPSON, ROBERT		
Address	421 WILLIAMS DITCH RD		
City-State-Zip:	CANTONMENT FL 32533		

DOCUMENT# L11000119230

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: CONTACT SERVICES OF CANTONMENT, LLC

Current Principal Place of Business:

421 WILLIAMS DITCH RD CANTONMENT, FL 32533

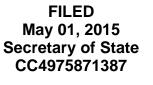
Current Mailing Address:

421 WILLIAMS DITCH RD CANTONMENT, FL 32533

FEI Number: 45-4974591

Name and Address of Current Registered Agent:

HICKEY, RAYMOND G 913 GULF BREEZE PKWY SUITE 5 GULF BREEZE, FL 32561 US



Date

05/01/2015

Date

MANAGING MEMBER