## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000005736

Entity Name: ANN MARIE NIELSEN, PH.D., LLC

**Current Principal Place of Business:** 

518 RIVERSIDE DRIVE

TARPON SPRINGS, FL 34689

**Current Mailing Address:** 

PO BOX 1760

TARPON SPRINGS. FL 34688 US

FEI Number: 45-4238599 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NIELSEN, ANN MARIE 518 RIVERSIDE DRIVE TARPON SPRINGS, FL 34689 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

FILED Apr 30, 2018

**Secretary of State** 

CC2024207069

## Authorized Person(s) Detail:

Title MGRM

Name NIELSEN, ANN MARIE
Address POST OFFICE BOX 1760

City-State-Zip: TARPON SPRINGS FL 34688

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.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail