

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000022758

Entity Name: KAPLAN SCHILLER RESEARCH, LLC.

Current Principal Place of Business:

747 SW 2ND AVE, STE 347 IMB#8
GAINESVILLE, FL 32601

Current Mailing Address:

PO BOX 13853
GAINESVILLE, FL 32604

FEI Number: 45-3529755

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHILLER, K. CAMERON
1213 NE 6TH AVE
GAINESVILLE, FL 32601 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 SCHILLER, K. CAMERON
Address 1213 NE 6TH AVE
City-State-Zip: GAINESVILLE FL 32601

Title MGRM
Name KAPLAN, FATMA
Address 1213 NE 6TH AVE
City-State-Zip: GAINESVILLE FL 32601

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: K. CAMERON SCHILLER

MGRM

01/09/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date