## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000133606

Entity Name: ALLEGIANT BENEFITS & SERVICES LLC

**Current Principal Place of Business:** 

8840 DARLENE DRIVE ORLANDO. FL 32836

**Current Mailing Address:** 

7512 DR. PHILLIPS BLVD SUITE 50-857 ORLANDO, FL 32819 US

FEI Number: 46-1236555 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOOD, DANA S 7512 DR PHILLIPS BLVD 50-857 ORLANDO, FL 32819 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: DANA S. WOOD 04/03/2017

Electronic Signature of Registered Agent

Date

FILED Apr 03, 2017

**Secretary of State** 

CC1459338705

## Authorized Person(s) Detail:

Title MGR

Name WOOD, DANA

Address 7512 DR PHILLIPS BLVD

50-857

City-State-Zip: ORLANDO FL 32819

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: DANA S. WOOD MANAGER 04/03/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date