#### 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000009062

Entity Name: VOCATIONAL ASSESSMENT SERVICES LLC

FILED
Mar 05, 2014
Secretary of State
CC3327641114

# **Current Principal Place of Business:**

11860 LIANA ST

8902

FORT MYERS, FL 33912

# **Current Mailing Address:**

11860 LIANA ST 8902 FORT MYERS, FL 33912 US

FEI Number: 46-1795992 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

WRIGHT, VICTORIA A 11860 LIANA ST 8902 FORT MYERS, FL 33912 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 OWNER

Name VICTORIA, WRIGHT Address 11860 LIANA ST

8902

City-State-Zip: FORT MYERS FL 33912

SIGNATURE: VICTORIA A. WRIGHT

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.

Electronic Signature of Signing Authorized Person(s) Detail

03/05/2014

**OWNER** 

Date