

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000013765

Entity Name: CANDIS COUNSELING & THERAPEUTIC SERVICES LLC

Current Principal Place of Business:

2004 W THONOTOSASSA RD
SUITE 102
PLANT CITY, FL 33563

Current Mailing Address:

204 W SAUNDERS ST
PLANT CITY, FL 33563

FEI Number: 46-1888960

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CANDIS, LAVASAOUS A
204 W SAUNDERS ST
PLANT CITY, FL 33563 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	Title	AUTHORIZED REPRESENTATIVE
Name	CANDIS, LAVASAOUS A	Name	CANDIS, ANNETTE D
Address	204 W SAUNDERS ST	Address	204 W SAUNDERS ST
City-State-Zip:	PLANT CITY FL 33563	City-State-Zip:	PLANT CITY FL 33563

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: LAVASAOUS A CANDIS

MGRM

01/31/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date