

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000068777

Entity Name: J.D. SPEECH PATHOLOGIST AND ASSOCIATES, LLC

Current Principal Place of Business:

216 BEHRING WAY
JUPITER, FL 33458

Current Mailing Address:

216 BEHRING WAY
JUPITER, FL 33458 US

FEI Number: 46-2750750

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FANIEL, JENNIFER
6007 NW WINFIELD DR.
PORT ST. LUCIE, FL 34986 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 MGR
Name FANIEL, SABRINA R
Address 6007 NW WINFIELD DR.
City-State-Zip: PORT ST. LUCIE FL 34986

Title MGR
Name FANIEL, COLLIS
Address 6007 NW WINFIELD DR.
City-State-Zip: PORT ST. LUCIE FL 34986

Title MGR
Name FANIEL, LILLIE
Address 6007 NW WINFIELD DR.
City-State-Zip: PORT ST. LUCIE FL 34986

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: SABRINA FANIEL

03/29/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date