

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000142520

Entity Name: ATS OF SWFL, LLC

Current Principal Place of Business:

11631 OLD US 41, SUITE 102
FORT MYERS, FL 33912

Current Mailing Address:

11631 OLD US 41, SUITE 102
FORT MYERS, FL 33912

FEI Number: 46-3837425

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MASSIE, CHARLES ABELS
15671 SAN CARLOS BLVD. SUITE 201
FORT MYERS, FL 33908 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 MANAGER
Name POLAND, JOHN
Address 722 PINECASTLE DR.
City-State-Zip: LEHIGH ACRES FL 33974

Title MANAGING MEMBER
Name JILLETT, JOHN
Address 5551 LUCKETT RD.
 C-74
City-State-Zip: FOERT MYERS FL 33905

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: JOHN JILLETT

MANAGING MEMBER

01/21/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date