

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000153171

FILED
Apr 27, 2016
Secretary of State
CC7097403932

Entity Name: THE ACADEMY OF BACTERIOLOGY, "L.L.C.

Current Principal Place of Business:

CANYON LAKES EXECUTIVE CENTER
10595 HILLTOP MEADOW POINT SUITE 202
BOYNTON BEACH, FL 33473

Current Mailing Address:

CANYON LAKES EXECUTIVE CENTER
10595 HILLTOP MEADOW POINT SUITE 202
BOYNTON BEACH, FL 33473 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOCKARD, KENNETH
CANYON LAKES EXECUTIVE CENTER
10595 HILLTOP MEADOW POINTE SUITE 202
BOYNTON BEACH, FL 33473 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	PRESIDENT	Title	MGRM
Name	LOCKARD, KENNETH G	Name	LOCKARD, DOUGLAS G
Address	CANYON LAKES EXECUTIVE CENTER 10595 HILLTOP MEADOW POINT SUITE 202	Address	CANYON LAKES EXECUTIVE CENTER 10595 HILLTOP MEADOW POINT SUITE 202
City-State-Zip:	BOYNTON BEACH FL 33473	City-State-Zip:	BOYNTON BEACH FL 33473
Title	MGRM	Title	H.R.MANAGER
Name	LOCKARD, MATTHEW C	Name	FRUSHOUR, JUDITH
Address	CANYON LAKES EXECUTIVE CENTER 10595 HILLTOP MEADOW POINT SUITE 202	Address	CANYON LAKES EXECUTIVE CENTER 10595 HILLTOP MEADOW POINT SUITE 202
City-State-Zip:	BOYNTON BEACH FL 33473	City-State-Zip:	BOYNTON BEACH FL 33473
Title	CONTROLLER	Title	EXCEUTIVE ADMINISTOR
Name	GUTMAN, GLENN	Name	LOCKARD, ELIZABETH
Address	CANYON LAKES EXECUTIVE CENTER 10595 HILLTOP MEADOW POINT SUITE 202	Address	CANYON LAKES EXECUTIVE CENTER 10595 HILLTOP MEADOW POINT SUITE 202
City-State-Zip:	BOYNTON BEACH FL 33473	City-State-Zip:	BOYNTON BEACH FL 33473

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: KENNETH LOCKARD

PRESIDENT

04/27/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date