

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000153171

**FILED**  
**Apr 07, 2022**  
**Secretary of State**  
**0433257771CC**

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

**Current Principal Place of Business:**

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

**Current Mailing Address:**

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

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GUTMAN, GLENN MICHAEL  
CANYON LAKES EXECUTIVE CENTER  
10595 HILLTOP MEADOW POINTE  
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: GLENN M GUTMAN**

**04/07/2022**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name LOCKARD, KENNETH JAMES  
Address CANYON LAKES EXECUTIVE CENTER  
10595 HILLTOP MEADOW POINT  
City-State-Zip: BOYNTON BEACH FL 33473

Title MGRM  
Name LOCKARD, MATTHEW C  
Address CANYON LAKES EXECUTIVE CENTER  
10595 HILLTOP MEADOW POINT  
City-State-Zip: BOYNTON BEACH FL 33473

Title H.R.MANAGER  
Name FRUSHOUR, JUDITH  
Address CANYON LAKES EXECUTIVE CENTER  
10595 HILLTOP MEADOW POINT  
City-State-Zip: BOYNTON BEACH FL 33473

Title CONTROLLER  
Name GUTMAN, GLENN M  
Address 21280 SAWMILL COURT  
City-State-Zip: BOCA RATON FL 33498

Title PRESIDENT  
Name LOCKARD, ELIZABETH  
Address CANYON LAKES EXECUTIVE CENTER  
10595 HILLTOP MEADOW POINT  
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: GLENN M GUTMAN**

**AGENT**

**04/07/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date