

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000167131

Entity Name: BELL-BRYANT'S PARAMED SERVICES LLC

Current Principal Place of Business:

2236 WEST 11TH STREET
JACKSONVILLE, FL 32209

Current Mailing Address:

2236 WEST 11TH STREET
JACKSONVILLE, FL 32209 US

FEI Number: 46-4299122

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BELL-BRYANT, MARQUITA
2236 WEST 11TH STREET
JACKSONVILLE, FL 32209 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
Name BELL-BRYANT, MARQUITA
Address 2236 WEST 11TH STREET
City-State-Zip: JACKSONVILLE FL 32209

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: MARQUITA BELL-BRYANT

CEO

01/26/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date