

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000067039

Entity Name: FACILITY PROS LLC

Current Principal Place of Business:

674 STONECREST LN
STE 1
CAPE CORAL, FL 33909

Current Mailing Address:

674 STONECREST LN
STE 1
CAPE CORAL, FL 33909 US

FEI Number: 27-2993594

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CAMPBELL, LISA M
674 STONECREST LN
STE. 1
CAPE CORAL, FL 33909 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: LISA M CAMPBELL

06/26/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CEO
Name CAMPBELL, JOHN C
Address 674 STONECREST LN
STE 1
City-State-Zip: CAPE CORAL FL 33909

Title MGR
Name CAMPBELL, LISA M
Address 674 STONECREST LN
STE 1
City-State-Zip: CAPE CORAL FL 33909

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: LISA M CAMPBELL

MGR

06/26/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date