

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000114932

Entity Name: TIFFANY CHENNEVILLE, PH.D., LLC

Current Principal Place of Business:

9800 4TH STREET NORTH
SUITE 200
ST. PETERSBURG, FL 33702

Current Mailing Address:

1212 15TH STREET NORTH
ST. PETERSBURG, FL 33705

FEI Number: 47-1399497

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHENNEVILLE, TIFFANY PHD
1212 15TH STREET NORTH
ST. PETERSBURG, FL 33705 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 MGR
Name CHENNEVILLE, TIFFANY PH.D.
Address 1212 15TH STREET NORTH
City-State-Zip: ST. PETERSBURG FL 33705

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: TIFFANY CHENNEVILLE, PHD

LICENSED
PSYCHOLOGIST AND
MGR

02/28/2020

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date