## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000134384

Entity Name: SHILTS CPA, PLLC

**Current Principal Place of Business:** 

416 OAK POND DR. ST. JOHNS, FL 32259

**Current Mailing Address:** 

416 OAK POND DR. ST. JOHNS, FL 32259

FEI Number: 47-1697998 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHILTS, JOSHUA J 416 OAK POND DR. ST. JOHNS, FL 32259 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

FILED Jan 19, 2016

**Secretary of State** 

CC8158393450

## Authorized Person(s) Detail:

Title MANAGING MEMBER

Name SHILTS, JOSH

Address 416 OAK POND DR.

City-State-Zip: ST. JOHNS FL 32259

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: JOSH SHILTS MANAGING MEMBER