## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000007925

Entity Name: ADVISORS ACADEMY PRESS, LLC

**Current Principal Place of Business:** 

6420 NE 21ST DRIVE

FORT LAUDERDALE, FL 33308

**Current Mailing Address:** 

P.O. BOX 1694

POMPANO BEACH, FL 33061 US

**FEI Number: APPLIED FOR** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC. 5575 S. SEMORAN BLVD. SUITE 36 ORLANDO, FL 32822 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** Feb 04, 2020

**Secretary of State** 

2322665632CC

Authorized Person(s) Detail:

Title **AMBR** Title AMBR

Name OHALLORAN, MICHELLE Name SCRANTON, DAVID J. Address **6420 NE 21ST DRIVE** Address 2895 NE. 27TH STREET City-State-Zip: FT. LAUDERDALE FL 33306

City-State-Zip: FORT LAUDERDALE FL 33308

Title **AMBR** 

Name NEUWIRTH, PAULINE

Address 19 WEST 21ST STREET S-1101

City-State-Zip: NEW YORK NY 10010

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: MICHELLE OHALLORAN

**AMBR** 

02/04/2020