## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000148082

Entity Name: CASSANDRA FLEMING, DVM, PLLC

**Current Principal Place of Business:** 

20889 NW 159TH LANE HIGH SPRINGS, FL 32643

**Current Mailing Address:** 

1831 E WADE STREET #1539 TRENTON. FL 32693 US

FEI Number: 47-4975728 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHN ROBERTS, P.A. 7 E. SILVER SPRINGS BLVD SUITE 103 OCALA, FL 34470 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: JOHN ROBERTS 02/06/2025

Electronic Signature of Registered Agent

Date

FILED Feb 06, 2025

**Secretary of State** 

5128242266CC

Authorized Person(s) Detail:

Title MGR

Name FLEMING, CASSANDRA DVM

Address 1671 NE SR 47

City-State-Zip: TRENTON FL 32693

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: CASSANDRA FLEMING

OWNER/MANAGER

02/06/2025