

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000190073

Entity Name: CENTURION OF FLORIDA, LLC**Current Principal Place of Business:**7700 FORSYTH BLVD
ST LOUIS, MO 63105**Current Mailing Address:**7700 FORSYTH BLVD
ST LOUIS, MO 63105 US**FEI Number: 81-0687470****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MANAGER
Name LUEKING, KEITH
Address 7700 FORSYTH BLVD
City-State-Zip: ST LOUIS MO 63105

Title VP, TAX
Name DINKELMAN, TRICIA
Address 7700 FORSYTH BLVD
City-State-Zip: ST LOUIS MO 63105

Title MANAGER
Name JOHNSON, DEANNA
Address 1593 SPRING HILL ROAD
City-State-Zip: VIENNA VA 22182

Title MANAGER
Name TONEY, COLIN
Address 7700 FORSYTH BLVD
City-State-Zip: ST LOUIS MO 63105

Title MANAGER
Name THOMAS, DAVID
Address 7700 FORSYTH BLVD
City-State-Zip: ST LOUIS MO 63105

Title MANAGER
Name WESCHKE, CHARLES
Address 1593 SPRING HILL ROAD
City-State-Zip: VIENNA VA 22182

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: TRICIA DINKELMAN**VICE PRESIDENT, TAX****04/26/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date