

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000026369

Entity Name: RIDGE MANOR MASSAGE THERAPY, LLC

Current Principal Place of Business:

33275 CORTEZ BLVD.
DADE CITY, FL 33523

Current Mailing Address:

33275 CORTEZ BLVD.
DADE CITY, FL 33523

FEI Number: 81-1389450

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHARBER, JARROD M ESQUIRE
38038 MERIDIAN AVE
DADE CITY, FL 33526 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 AMBR
Name CHARLENE H. RUDE LMT, LLC
Address 34648 DOGWOOD DR.
City-State-Zip: RIDGE MANOR FL 33523

Title AMBR
Name VIRGENE A. GABISCH LMT, L.L.C.
Address 25924 COMANCHE ST.
City-State-Zip: BROOKSVILLE FL 34601

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: CHARLENE H RUDE

MANAGER

01/11/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date