## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000081588

Entity Name: COLLEGE PLANNING PARTNERS LLC

**Current Principal Place of Business:** 

205 S MILL RIDGE TRAIL

PONTE VEDRA BEACH. FL 32082

**Current Mailing Address:** 

205 S MILL RIDGE TRAIL

PONTE VEDRA BEACH, FL 32082 US

FEI Number: 81-2431588 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OHNO, PAMELA K 205 S MILL RIDGE TRAIL PONTE VEDRA BEACH, FL 32082 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 10, 2019

**Secretary of State** 

8665671536CC

Authorized Person(s) Detail:

Title MGR Title MGR

Name OHNO, PAMELA K Name SNOWDEN, CATHERINE W
Address 205 S MILL RIDGE TRAIL Address 522 LEMASTER DRIVE

City-State-Zip: PONTE VEDRA BEACH FL 32082 City-State-Zip: PONTE VEDRA BEACH FL 32082

Title MGR

Name SNOWDEN, ROBERT T
Address 522 LEMASTER DRIVE

City-State-Zip: PONTE VEDRA BEACH FL 32082

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: PAMELA K OHNO

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER 02/10/2019

Date