

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000114513

**Entity Name:** PERFORMANCE MANAGEMENT ASSOCIATES, LLC

**Current Principal Place of Business:**

4958 WESTCHESTER COURT, #4003  
NAPLES, FL 34105

**Current Mailing Address:**

PO BOX 7946  
NAPLES, FL 34101 US

**FEI Number: 81-2983444**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LARKIN, ROBIN W  
4958 WESTCHESTER COURT, #4003  
NAPLES, FL 34105 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            MGMR  
Name            LARKIN, ROBIN W  
Address        4958 WESTCHESTER COURT, #4003  
City-State-Zip: NAPLES FL 34105

*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: ROBIN W. LARKIN**

**MANAGING MEMBER**

**02/12/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date