

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000186117

Entity Name: PIONEER DEVELOPMENT SERVICES 2, LLC

Current Principal Place of Business:

2700 HEALING WAY
STE 320
WESLEY CHAPEL, FL 33543

Current Mailing Address:

2700 HEALING WAY
STE 320
WESLEY CHAPEL, FL 33543

FEI Number: 81-3746630

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHARBER, JARROD M
38038 MERIDIAN AVE.
DADE CITY, FL 33525 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 ALI, SYED
Address 17702 SAINT LUCIA ISLE DR.
City-State-Zip: TAMPA FL 33647

Title AMBR
Name SHAUKAT, KHIZZAR
Address 10528 MARTINIQUE ISLE DR.
City-State-Zip: TAMPA FL 33647

Title MBR
Name BROWN, MILTON
Address 20232 RAVENS END DR.
City-State-Zip: TAMPA FL 33647

Title MBR
Name MERCADO, RONNIEL
Address 2114 RENSSELAER DR.
City-State-Zip: WESLEY CHAPEL FL 33543

Title MBR
Name KHAN, MASOOD
Address 20114 NATURES HIKE WAY
City-State-Zip: TAMPA FL 33647

Title MBR
Name GONZALEZ, ANA
Address 4355 VERMILLION SKY DR.
City-State-Zip: WESLEY CHAPEL FL 33544

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: SYED ALI

MEMBER

01/23/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date