

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000177954

Entity Name: CARDI-ACT CPR TRAINING, LLC

Current Principal Place of Business:

2500 WEST LAKE DR.
DELAND, FL 32724

Current Mailing Address:

2500 WEST LAKE DR.
DELAND, FL 32724 US

FEI Number: 82-3622293

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCOTT, MICHELE C
2500 WEST LAKE DR.
DELAND, FL 32724 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 AUTHORIZED MEMBER
Name CARUSO, ALLISON
Address 339 N. OAK STREET
City-State-Zip: LONGWOOD FL 32750

Title MANAGING MEMBER
Name SCOTT, MICHELE C
Address 2500 WEST LAKE DR.
City-State-Zip: DELAND FL 32724

Title AUTHORIZED MEMBER
Name CARUSO, DESIREE
Address 191 FIESTA DR
City-State-Zip: KISSIMMEE FL 34743

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: MICHELE C. SCOTT

MANAGING MEMBER

04/06/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date