

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000170989

Entity Name: DYSLEXIA CENTRAL FLORIDA LLC

Current Principal Place of Business:

7880 W HWY 326
OCALA, FL 34482

Current Mailing Address:

7880 W HIGHWAY 326
OCALA, FL 34482 US

FEI Number: 59-2267553

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GALLAGHER, TARA D
7880 W HWY 326
OCALA, FL 34482 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 MGR
Name GALLAGHER, TARA D
Address 7880 W HWY 326
City-State-Zip: Ocala FL 34482

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: TARA GALLAGHER

MGR

02/15/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date