

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000001282

Entity Name: INTERACTIVE SCHOOL THERAPY LLC

Current Principal Place of Business:

4674 RUNNING BROOK TERRACE
GREENWOOD, IN 46143

Current Mailing Address:

PO BOX 1070
GREENWOOD, IN 46142

FEI Number: 47-1364263

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STROM, ERIC
19095 SE CORAL REEF LANE
JUPITER, FL 33548 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 MEM
Name WILKINS, SUSAN
Address 4674 RUNNING BROOK TERRACE
City-State-Zip: GREENWOOD IN 46143

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: SUSAN WILKINS

MEMBER

04/29/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date