

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000008416

**Entity Name:** FLORIDA MEDIATION TRAINING, INC.

**Current Principal Place of Business:**

5127 62ND ST  
LIVE OAK, FL 32060

**Current Mailing Address:**

P.O. BOX 6124  
LIVE OAK, FL 32064 US

**FEI Number:** 46-4657606

**Certificate of Status Desired:** No

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

LUNSFORD, KEVIN C  
5127 62ND ST  
LIVE OAK, FL 32060 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

**Officer/Director Detail :**

Title P  
Name LUNSFORD, KEVIN C  
Address P.O. BOX 6124  
City-State-Zip: LIVE OAK FL 32064

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KEVIN C. LUNSFORD

**PRESIDENT**

**03/08/2025**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date