# 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P98000015407

# Entity Name: ADVANCE SPEECH THERAPY SERVICES, INC.

#### **Current Principal Place of Business:**

962 S.W. HAMBERLAND AVE. PORT ST. LUCIE, FL 34953

## **Current Mailing Address:**

962 S.W. HAMBERLAND AVE. PORT ST. LUCIE, FL 34953

# FEI Number: 65-0822408

## Name and Address of Current Registered Agent:

MCCANDLESS, JANELLE B 962 S.W. HAMBERLAND AVE. PORT ST. LUCIE, FL 34953 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

# **Officer/Director Detail :**

Title	VP	Title	PRES
Name	MCCANDLESS, BRIAN	Name	MCCANDLESS, JANELLE B
Address	962 S.W. HAMBERLAND AVE.	Address	962 SW HAMBERLAND AVE.
City-State-Zip:	PORT ST. LUCIE FL 34953	City-State-Zip:	PORT ST. LUCIE FL 34953

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: JANELLE MCCANDLESS

PRESIDENT

03/29/2014

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 29, 2014 Secretary of State CC0712337131

Certificate of Status Desired: No

Date