

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000001966

Entity Name: COMPUTEROPATHY SPECIALISTS LLC

Current Principal Place of Business:

7114 WRENWOOD CIRCLE
TAMPA, FL 33617

Current Mailing Address:

5470 E. BUSCH BLVD
#426
TAMPA, FL 33617

FEI Number: 43-1998193

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRYAN, EARL W
7114 WRENWOOD CIRCLE
TAMPA, FL 33617 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 CEO
Name BRYAN, EARL W
Address 7114 WRENWOOD CIRCLE
City-State-Zip: TAMPA FL 33617

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: EARL BRYAN

CEO

01/29/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date