

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000027343

**Entity Name:** HARVEY, COVINGTON & THOMAS OF CENTRAL FLORIDA, LLC

**FILED**  
**Apr 26, 2016**  
**Secretary of State**  
**CC4646105015**

**Current Principal Place of Business:**

155 CRANES ROOST BLVD.  
SUITE 2010  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

155 CRANES ROOST BLVD.  
SUITE 2010  
ALTAMONTE SPRINGS, FL 32701 US

**FEI Number:** 13-4322921

**Certificate of Status Desired:** No

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

HCT  
155 CRANES ROOST BLVD.  
SUITE 2010  
ALTAMONTE SPRINGS, FL 32701 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 MMGR  
Name COVINGTON, SABRINA  
Address 155 CRANES ROOST BLVD.  
2010  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

*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:** SABRINA D. COVINGTON

**MGR MEMBER**

**04/26/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date