

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000043228

**Entity Name:** FLORIDA SURE STEP LLC

**Current Principal Place of Business:**

12161 CRESTRIDGE LOOP  
TRINITY, FL 34655

**Current Mailing Address:**

12161 CRESTRIDGE LOOP  
TRINITY, FL 34655 US

**FEI Number:** 20-8897661

**Certificate of Status Desired:** No

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

CURE, THOMAS J  
12161 CRESTRIDGE LOOP  
TRINITY, FL 34655 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 MGR  
Name CURE, THOMAS J  
Address 12161 CRESTRIDGE LOOP  
City-State-Zip: TRINITY FL 34655

*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:** THOMAS J CURE

MGR

02/19/2016

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

\_\_\_\_\_  
Date