## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000101982

Entity Name: CASSELLS & ASSOCIATES, CPA, LLC

**Current Principal Place of Business:** 

3600 RED ROAD 407

MIRAMAR, FL 33025

**Current Mailing Address:** 

PO BOX 820297

PEMBROKE PINES, FL 33082

FEI Number: 26-1343222 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASSELLS-WILSON, ANNETTE 3600 RED ROAD 407 MIRAMAR, FL 33025 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: ANNETTE CASSELLS-WILSON 03/09/2016

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Address

MGR Title **AUTHORIZED MEMBER** Title

CASSELLS-WILSON, ANNETTE WILSON, RICKY Name Name 3600 RED ROAD 3600 RED ROAD Address

407

City-State-Zip: MIRAMAR FL 33025 City-State-Zip: MIRAMAR FL 33025

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: ANNETTE CASSELLS-WILSON

**MANAGER** 

03/09/2016

**FILED** Mar 09, 2016

**Secretary of State** 

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