

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000047359

Entity Name: MY SEPTIC DOCTOR LLC

Current Principal Place of Business:

2917 SE COUNTRY CLUB RD.
LAKE CITY, FL 32025

Current Mailing Address:

2917 SE COUNTRY CLUB RD.
LAKE CITY, FL 32025

FEI Number: 26-2069648

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LLOYD, ROBERT P
2917 SE COUNTRY CLUB RD.
LAKE CITY, FL 32025 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 MGRM
Name LLOYD, ROBERT P
Address 2917 SE COUNTRY CLUB RD.
City-State-Zip: LAKE CITY FL 32025

Title MGR
Name LLOYD, EDNA E MANAGER
Address 2917 SE COUNTRY CLUB RD.
City-State-Zip: LAKE CITY FL 32025

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: ROBERT P. LLOYD

MANAGER

04/30/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date