

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000082771

Entity Name: FLOWING TOUCH MASSAGE, LLC

Current Principal Place of Business:

5143 CEDAR HAMMOCK DRIVE
SARASOTA, FL 34232

Current Mailing Address:

P.O. BOX 2461
SARASOTA, FL 34230 US

FEI Number: 37-1588013

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PALMER, THOMAS
5143 CEDAR HAMMOCK DRIVE
.
SARASOTA, FL 34232 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 PALMER, THOMAS
Address 5143 CEDAR HAMMOCK DRIVE
.
City-State-Zip: SARASOTA FL 34232

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 A. PALMER

MGR

01/15/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date