

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000063002

**Entity Name:** LITTLE FOOTSTEPS ACADEMY,LLC

**Current Principal Place of Business:**

4718 OLD HWY 37  
LAKELAND, FL 33813

**Current Mailing Address:**

4718 OLD HWY 37  
LAKELAND, FL 33813 US

**FEI Number: 37-1640415**

**Certificate of Status Desired: No**

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

SHIVER, CHARLENE  
5711 SHIVER TRAIL  
PLANT CITY, FL 33565 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 CHARLENE, SHIVER  
Address 5711 SHIVER TRAIL  
City-State-Zip: PLANT CITY FL 33565

Title MGRM  
Name TIMOTHY, SHIVER  
Address 5711 SHIVER TRAIL  
City-State-Zip: PLANT CITY FL 33565

*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: CHARLENE L SHIVER**

**MGRM**

**03/04/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date