

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000001583

Entity Name: ANITA K. SIMPSON & ASSOCIATES, LLC

Current Principal Place of Business:

6796 NIGHTWIND CIRCLE
ORLANDO, FL 32818

Current Mailing Address:

6796 NIGHTWIND CIRCLE
ORLANDO, FL 32818 US

FEI Number: 45-4164855

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIMPSON, ANITA K
6796 NIGHTWIND CIRCLE
ORLANDO, FL 32818 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 SIMPSON, ANITA K
Address 6796 NIGHTWIND CIRCLE
City-State-Zip: ORLANDO FL 32818

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: ANITA K. SIMPSON

MANAGER

04/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date