

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000051498

**Entity Name:** SPIRIT2SPIRIT TRAUMA TRAINING & TREATMENT, LLC.

**Current Principal Place of Business:**

1313 SE 18TH AVENUE  
OCALA, FL 34471

**Current Mailing Address:**

1313 SE 18 AVENUE  
OCALA, FL 34471 US

**FEI Number: 27-2095788**

**Certificate of Status Desired: Yes**

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

GOODING, W. JAMES III  
1531 SE 36 AVENUE  
OCALA, FL 34471 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	Title	VP
Name	CRANE, JUDITH T	Name	PECCA, THOMAS
Address	1313 SE 18 AVENUE	Address	1313 SE 18TH AVENUE
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34471

*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: JUDITH T CRANE**

**MGR**

**01/07/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date