#### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000051498

Entity Name: SPIRIT2SPIRIT TRAUMA TRAINING & TREATMENT, LLC.

FILED
Apr 15, 2015
Secretary of State
CC4005296544

# **Current Principal Place of Business:**

14835 SE 85TH STREET OCKLAWAHA, FL 32179

# **Current Mailing Address:**

**PO BOX 848** 

OCKLAWAHA. FL 32183-0848 US

FEI Number: 27-2095788 Certificate of Status Desired: No

# 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

Name CRANE, JUDITH T

Address PO BOX 848

City-State-Zip: OCKLAWAHA FL 32179

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

MANAGING MEMBER

04/15/2015