

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000066528

**Entity Name:** D C TEAM REFERRAL NETWORK LLC

**Current Principal Place of Business:**

735 ARLINGTON AVE.  
SUITE 213  
ST PETERSBURG, FL 33701

**Current Mailing Address:**

3820 46TH AVE S  
ST PETERSBURG, FL 33711 US

**FEI Number:** 45-5287985

**Certificate of Status Desired:** Yes

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

GRICE, NORWOOD S  
3820 46TH AVE S  
ST PETERSBURG, FL 33711 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	PRESIDENT	Title	MGR
Name	GRICE, NORWOOD S	Name	CUNNINGHAM, DEBRA
Address	3820 46TH AVE S	Address	735 ARLINGTON AVE., #213
City-State-Zip:	ST PETERSBURG FL 33711	City-State-Zip:	ST. PETERSBURG FL 33701

*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:** NORWOOD S. GRICE

**PRESIDENT**

**01/08/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date