

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000162436

**Entity Name:** PATRICIA SCHMITT, CPP, LLC

**Current Principal Place of Business:**

14219 WALSINGHAM RD.  
SUITE K  
LARGO, FL 33774

**FILED**  
**Feb 09, 2017**  
**Secretary of State**  
**CC4612345552**

**Current Mailing Address:**

9355 113TH STREET  
# 7707  
SEMINOLE, FL 33775 US

**FEI Number:** 46-4148255

**Certificate of Status Desired:** No

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

SCHMITT, PATRICIA A  
9355 113TH STREET  
#7707  
SEMINOLE, FL 33775 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 SCHMITT, PATRICIA A  
Address 9355 113TH STREET  
#7707  
City-State-Zip: SEMINOLE FL 33775

*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:** PATRICIA A SCHMITT

MGRM

02/09/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date