

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000002085

Entity Name: LUCINDA L GALLAGHER, CPA LLC

Current Principal Place of Business:

1232 CREEK BEND ROAD
SAINT JOHNS, FL 32259

Current Mailing Address:

1232 CREEK BEND ROAD
1232 CREEK BEND ROAD, FL 32259

FEI Number: 90-1039090

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GALLAGHER, LUCINDA L
1232 CREEK BEND ROAD
1232 CREEK BEND ROAD, FL 32259 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 GALLAGHER, LUCINDA L
Address 1232 CREEK BEND ROAD
City-State-Zip: SAINT JOHNS FL 32259

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: LUCINDA L GALLAGHER

PRESIDENT

01/21/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date