

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000147164

Entity Name: ELISA WELLS JONES, LCSW, LLC

Current Principal Place of Business:

9934 SE 170TH AVE RD
OCKLAWAHA, FL 32179

Current Mailing Address:

PO BOX 1365
SILVER SPRINGS, FL 34489 UN

FEI Number: 47-2185696

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES, ELISA W LCSW
9934 SE 170TH AVE RD
OCKLAWAHA, FL 32179 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 AP
Name JONES, ELISA W LCSW
Address PO BOX 1365
City-State-Zip: SILVER SPRINGS FL 34489

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: ELISA WELLS JONES

LCSW

04/30/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date