

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000140538

Entity Name: THERAPY HORSES, LLC

Current Principal Place of Business:

2576 ESCADA DRIVE
NAPLES, FL 34109

Current Mailing Address:

2576 ESCADA DRIVE
NAPLES, FL 34109 US

FEI Number: 47-4852530

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DALESSANDRO, JEANNE M
2576 ESCADA DRIVE
NAPLES, FL 34109 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 DALESSANDRO, JEANNE M
Address 2576 ESCADA DRIVE
City-State-Zip: NAPLES FL 34109

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: JEANNE M. DALESSANDRO

MANAGER

03/03/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date