2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2019
Secretary of State
4638241183CC

DOCUMENT# L16000178135

Entity Name: JAYCARE ADULT TRAINING CENTER LLC

Current Principal Place of Business:

4609 HORTON ROAD
PLANT CITY, FL 33567

Current Mailing Address:

4990 NESMITH ROAD
PLANT CITY, FL 33567 US

FEI Number: 81-3937945

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCGRIFF, JOYCE D
4990 NESMITH ROAD
PLANT CITY, FL 33567 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	MCGRIFF, JOYCE D
Address	4990 NESMITH ROAD
City-State-Zip:	PLANT CITY FL 33567

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: JOYCE D. MCGRIFF CEO 04/05/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date