## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000019928

Entity Name: NAPLES FAMILY CONCIERGE, PLLC

**Current Principal Place of Business:** 

1175 CREEKSIDE PKWY **UNIT 200** 

NAPLES, FL 34108

## **Current Mailing Address:**

14558 INDIGO LAKES CIR NAPLES, FL 34119 US

FEI Number: 81-5555514 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC. 13302 WINDING OAK COURT, SUITE A TAMPA, FL 33612 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:

Date

Authorized Person(s) Detail:

**AMBR** Title Title MGR

Electronic Signature of Registered Agent

LEVENS, GERALD LEVENS, GERALD Name Name

1175 CREEKSIDE PARKWAY 1175 CREEKSIDE PKWY Address Address

> **UNIT 200 UNIT 200**

NAPLES FL 34108 NAPLES FL 34108 City-State-Zip: City-State-Zip:

Title MGR

Name LEVENS, MELISSA

1175 CREEKSIDE PKWY Address

**UNIT 200** 

City-State-Zip: NAPLES FL 34108

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: GERALD LEVENS

Electronic Signature of Signing Authorized Person(s) Detail

MD

06/27/2018

**FILED** Jun 27, 2018

**Secretary of State** 

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