

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000039657

Entity Name: COLLIER ORTHOTICS & PROSTHETICS CONSULTANTS "LLC"

Current Principal Place of Business:

335 N MAGNOLIA AVE
APT 2203 2203
ORLANDO, FL 32801

Current Mailing Address:

335 N MAGNOLIA AVE
2203
ORLANDO, FL 32801 US

FEI Number: 81-5475831

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLLIER, RAY E
335 N MAGNOLIA AVE
2203
ORLANDO, FL 32801 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 COLLIER, RAY E
Address 335 N MAGNOLIA AVE
2203
City-State-Zip: ORLANDO FL 32801

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: RAY COLLIER

MGR

04/25/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date