## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000153825

Entity Name: DREAMLAND EVENING DAYCARE, LLC

**Current Principal Place of Business:** 

12704 BLUE LAGOON TRAIL JACKSONVILLE. FL 32225

**Current Mailing Address:** 

12704 BLUE LAGOON TRAIL JACKSONVILLE. FL 32225 US

FEI Number: 82-2113816 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PRESSLEY, ERIKA M MS. 12704 BLUE LAGOON TRAIL N JACKSONVILLE, FL 32210 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

FILED Apr 29, 2018

**Secretary of State** 

CC2557895559

Authorized Person(s) Detail:

Title MGR Title AUTHORIZED REPRESENTATIVE

Name PRESSLEY, ERIKA Name PRESSLEY, KAREN

Address 12704 BLUE LAGOON TRAIL Address 12704 BLUE LAGOON TRAIL

City-State-Zip: JACKSONVILLE FL 32225

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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: ERIKA PRESSLEY

**MGR** 

04/29/2018