

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000117859

Entity Name: KAREN ORRISS-ROSS, LLC

Current Principal Place of Business:

5255 ALLIGATOR LAKE ROAD
ST CLOUD, FL 34772

Current Mailing Address:

5255 ALLIGATOR LAKE ROAD
ST CLOUD, FL 34772 US

FEI Number: 83-0574602

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ORRISS-ROSS, KAREN L
5255 ALLIGATOR LAKE ROAD
ST CLOUD, FL 34772 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 ORRISS-ROSS, KAREN L
Address 5255 ALLIGATOR LAKE ROAD
City-State-Zip: ST CLOUD FL 34772

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: KAREN ORRISS-ROSS

MGR

02/13/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date