## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000144125

Entity Name: CHITOZAN HEALTH, LLC

**Current Principal Place of Business:** 

13883 WHITE HERON PLACE JACKSONVILLE, FL 32224-4804

**Current Mailing Address:** 

13883 WHITE HERON PLACE JACKSONVILLE, FL 32224-4804 US

FEI Number: 83-0865639 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VAN HORN, DWIGHT AUSTIN 13883 WHITE HERON PLACE JACKSONVILLE, FL 32224 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: DWIGHT AUSTIN VAN HORN 02/20/2019

Electronic Signature of Registered Agent

Date

FILED Feb 20, 2019

**Secretary of State** 

6143637827CC

Authorized Person(s) Detail:

Title PRESIDENT Title PRESIDENT

Name VAN HORN, DWIGHT AUSTIN Name TAYLOR, MATTHEW

Address 13883 WHITE HERON PLACE Address UNIT 6C STATION LANE

City-State-Zip: JACKSONVILLE FL 32224-4804 City-State-Zip: OLD WHITTINGTON CHESTERFIELD

S419NY

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: DWIGHT AUSTIN VAN HORN

**PRESIDENT** 

02/20/2019