

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000087006

**Entity Name:** CORNERSTONE STAFFING AND CONSULTANT SERVICES, LLC

**FILED**  
**Apr 26, 2021**  
**Secretary of State**  
**7757067212CC**

**Current Principal Place of Business:**

10419 LAKESIDE VISTA DRIVE  
RIVERVIEW, FL 33569

**Current Mailing Address:**

10419 LAKESIDE VISTA DRIVE  
RIVERVIEW, FL 33569 US

**FEI Number: 85-0591133**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GROSVENOR, MARIA  
10419 LAKESIDE VISTA DRIVE  
RIVERVIEW, FL 33569 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	Title	MGR
Name	GROSVENOR, MARIA	Name	NAYIB, ACHECAR
Address	10419 LAKESIDE VISTA DRIVE	Address	6510 LENORE DRIVE
City-State-Zip:	RIVERVIEW FL 33569	City-State-Zip:	TAMPA FL 33634

*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: MARIA GROSVENOR**

**MANAGER**

**04/26/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date