

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000025944

**FILED
Feb 22, 2019
Secretary of State
4344271521CC**

Entity Name: SUNCOAST NEUROPSYCHOLOGY, L.L.C.

Current Principal Place of Business:

2937 BEE RIDGE RD.
SUITE 9
SARASOTA, FL 34239

Current Mailing Address:

2937 BEE RIDGE RD.
SUITE 9
SARASOTA, FL 34239 US

FEI Number: 90-0455592

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOLDSMITH, STANLEY A
2937 BEE RIDGE ROAD
SUITE 9
SARASOTA, FL 34239 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 SESTA, JOSEPH J
Address 1336 PUERTO DRIVE
City-State-Zip: APOLLO BEACH FL 33572

Title PST
Name SESTA, JOSEPH J
Address 1336 PUERTO DRIVE
City-State-Zip: APOLLO BEACH FL 33572

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: JOSEPH J. SESTA (SAG)

MANAGER

02/22/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date