

2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L09000073118

Entity Name: PARK PLACE THERAPY LLC

Current Principal Place of Business:

6802 N ARMENIA AVE
SUITE A
TAMPA, FL 33604

Current Mailing Address:

6802 N ARMENIA AVE
SUITE A
TAMPA, FL 33604 US

FEI Number: 27-0648888

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, JOSE
6802 N ARMENIA AVE
SUITE A
TAMPA, FL 33604 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 LOPEZ, JOSE
Address 6802 N ARMENIA AVE
SUITE A
City-State-Zip: TAMPA FL 33604

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: JOSE LOPEZ

MNG

10/26/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date