## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000041707

Entity Name: SEVEN OAKS PSYCHOLOGY, PLC

**Current Principal Place of Business:** 

2307 NESSLEWOOD DR. WESLEY CHAPEL. FL 33543

**Current Mailing Address:** 

1936 BRUCE B. DOWNS BLVD PO BOX 112 WESLEY CHAPEL, FL 33544 US

FEI Number: 45-1596613 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CROSWELL, KEVIN L DR. 1936 BRUCE B. DOWNS BLVD. PO BOX 112 WELSEY CHAPEL, FL 33544 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: KEVIN L. CROSWELL, PSY.D. 03/29/2019

**Electronic Signature of Registered Agent** 

Date

FILED Mar 29, 2019

**Secretary of State** 

5164973411CC

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name CROSWELL, KEVIN L Name LEWIS-CROSWELL, JACLYN
Address 1936 BRUCE B. DOWNS BLVD Address 1936 BRUCE B. DOWNS BLVD

PO BOX 112 PO BOX 112

City-State-Zip: WESLEY CHAPEL FL 33544 City-State-Zip: WESLEY CHAPEL FL 33544

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: KEVIN L CROSWELL, PSY.D.

OWNER/MANAGER

03/29/2019