

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000049333

Entity Name: CONCORD TREATMENT CENTER LLC

Current Principal Place of Business:

3023 EASTLAND BOULEVARD
SUITE 106
CLEARWATER, FL 33761

Current Mailing Address:

3023 EASTLAND BOULEVARD
SUITE 106
CLEARWATER, FL 33761

FEI Number: 45-2045078

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCARGLE, MICHELLE R
3023 EASTLAND BOULEVARD
SUITE 106
CLEARWATER, FL 33761 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 MGRM
Name SCARGLE, MICHELLE R
Address 3023 EASTLAND BOULEVARD
City-State-Zip: CLEARWATER FL 33761

Title MGRM
Name CUADRA, G J
Address 2840 WEST BAY DRIVE #148
City-State-Zip: BELLEAIR BLUFFS FL 33770

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: MICHELLE SCARGLE

MGRM

03/06/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date