

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000118561

Entity Name: ACADEMY 4 HEALTH BOYNTON BEACH LLC

Current Principal Place of Business:

235 NW 46 AVE
SUITE B
DELRAY BEACH, FL 33443

Current Mailing Address:

235 NW 46 AVE
SUITE B
DELRAY BEACH, FL 33443 US

FEI Number: 35-2348714

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ALUKA, KODJO
6350 W ATLANTIC BLVD
UNIT 5
MARGATE, FL 33063 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 PRES
Name MCDERMOTT, GEORGE DR
Address 235 NW 46TH AVE
UNIT B
City-State-Zip: DELRAY BEACH FL 33445

Title VICE
Name FRANCIS, JOSEPH
Address 6677 SOUTH PORT DRIVE
City-State-Zip: BOYNTON BEACH FL 33426

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: GEORGE MCDERMOTT

PRESIDENT

03/30/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date