

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000106777

Entity Name: G AND R PSYCHIATRIC DYNAMICS, LLC

Current Principal Place of Business:

804 DUNLAWTON AVENUE
PORT ORANGE, FL 32127

Current Mailing Address:

804 DUNLAWTON AVENUE
PORT ORANGE, FL 32127

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARA, WENDY A
555 WEST GRANADA BLVD., STE. B-5
ORMOND BEACH, FL 32174 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	P	Title	VP
Name	FRICK, GARY M.D.	Name	FRICK, ROSALYN
Address	804 DUNLAWTON AVENUE	Address	804 DUNLAWTON AVENUE
City-State-Zip:	PORT ORANGE FL 32127	City-State-Zip:	PORT ORANGE FL 32127

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: GARY FRICK, M.D.

PRESIDENT

03/24/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date