

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000164228

Entity Name: LIFESPAN BEHAVIOR SERVICES, LLC

Current Principal Place of Business:

10252 S US HWY 441
UNITS 1, 3 , 4 & 5
BELLEVIEW, FL 34420

Current Mailing Address:

POST OFFICE BOX 830392
OCALA, FL 34483 US

FEI Number: 81-3839900

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HILLYGUS, ANGELLE N
10252 S US HWY 441
UNITS 1, 3 , 4 & 5
BELLEVIEW, FL 34420 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	Title	MGR
Name	HILLYGUS, ANGELLE N	Name	TOBON, ANDREA
Address	POST OFFICE BOX 830392	Address	2475 SE HIGHWAY 484
City-State-Zip:	OCALA FL 34483	City-State-Zip:	BELLEVIEW FL 34420

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: ANGELLE HILLYGUS

MANAGER

01/10/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date