

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000185039

Entity Name: COASTAL TREATMENT CENTER, NOKOMIS LLC

Current Principal Place of Business:

119 N. TAMIAMI TRAIL
NOKOMIS, FL 34275

Current Mailing Address:

119 N. TAMIAMI TRAIL
NOKOMIS, FL 34275 US

FEI Number: 82-2656867

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
7901 4TH STREET NORTH
SUITE 300
ST.PETERSBURG, FL 33702 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
Name FOX, CHRIS
Address 119 N. TAMIAMI TRAIL
City-State-Zip: NOKOMIS FL 34275

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: CHRIS FOX

MGR

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date