

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000243296

Entity Name: OAKS FAMILY COUNSELING LLC

Current Principal Place of Business:

1204 NW 69TH TERR, SUITE F
GAINESVILLE, FL 32608

Current Mailing Address:

8318 SW 103RD AVE
GAINESVILLE, FL 32608 US

FEI Number: 83-2270605

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORCORAN, ALLYSON G
8318 SW 103RD AVE
GAINESVILLE, FL 32608 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 CORCORAN, ALLYSON G
Address 8318 SW 103RD AVE
City-State-Zip: GAINESVILLE FL 32608

Title AUTHORIZED MEMBER
Name CORCORAN, ERIC C
Address 1204 NW 69TH TERR, SUITE F
City-State-Zip: GAINESVILLE FL 32608

Title AUTHORIZED MEMBER
Name CORCORAN, RILEY M
Address 1204 NW 69TH TERR, SUITE F
City-State-Zip: GAINESVILLE FL 32608

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: ALLYSON CORCORAN

MGR

04/25/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date