

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000058320

Entity Name: SUN COAST BEHAVIORAL HEALTH, PLLC

Current Principal Place of Business:

15211 CORTEZ BLVD
BROOKSVILLE, FL 34613

Current Mailing Address:

15211 CORTEZ BLVD
BROOKSVILLE, FL 34613 US

FEI Number: 84-4231092

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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: BREJET STEPHENS, ASSISTANT SECRETARY

04/17/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT
Name SHARMA MD, ANIL
Address 14860 ROSCOE BLVD
 SUITE 304
City-State-Zip: PANORAMA CITY CA 91402

Title DIRECTOR, OTHER
Name WELKE, TIMOTHY
Address 9250 RESEADA BLVD # 658
City-State-Zip: NORTHRIDGE CA 91324

Title VP
Name SINGH, PARIKSITH
Address 5350 SPRING HILL DR.,
City-State-Zip: SPRING HILL FL 34606

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: TIMOTHY WELKE

DIRECTOR

04/17/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date