

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000130074

**Entity Name:** ADVOCATE RECREATIONAL THERAPY LLC

**Current Principal Place of Business:**

9944 GRADE LAKES BLVD  
APT 3329  
ORLANDO, FL 32837

**Current Mailing Address:**

14232 SPORTS CLUB WAY  
ORLANDO, FL 32837 US

**FEI Number: 86-2967954**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SHEENA DAUGHERTY  
14232 SPORTS CLUB WAY  
ORLANDO, FL 32837 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	CEO	Title	CO-C
Name	DAUGHERTY, SHEENA M	Name	DESHIELD, ALICIA D
Address	1729 PLANTATION POINT DRIVE	Address	10012 VISTA LAGUNA DR. APT #303
City-State-Zip:	ORLANDO FL 32824	City-State-Zip:	ORLANDO FL 32825

*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: SHEENA DAUGHERTY**

**SHEENA DAUGHERTY**

**05/01/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date