2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2024
Secretary of State
3226945813CC

DOCUMENT# L21000275234

Entity Name: TABONO CLINICAL SUPERVISON AND COUNSELING LLC:

Current Principal Place of Business:

13130 LAKEWIND DRIVE
CLERMONT, FL 34711

Current Mailing Address:

13130 LAKEWIND DRIVE
CLERMONT, FL 34711

FEI Number: 87-1363797

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SMITH, VIRGINIA Y
1313O LAKEWIND DRIVE
CLERMONT, FL 34711 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	SMITH, DAVE M	Name	SMITH, VIRGINIA Y
Address	13130 :LAKEWIND DRIVE	Address	13130 LAKEWIND DRIVE
City-State-Zip:	CLERMONT FL 34711	City-State-Zip:	CLERMONT FL 34711

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: VIRGINIA Y SMITH MGR 04/16/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date