

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000422345

Entity Name: BAYA CLINICAL SERVICES LLC

Current Principal Place of Business:

780 SE BAYA DRIVE
LAKE CITY, FL 32025

Current Mailing Address:

780 SE BAYA DRIVE
LAKE CITY, FL 32025

FEI Number: 87-2852680

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GREEN, BONNIE S
1241 S. MARION AVENUE
LAKE CITY, FL 32025 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	ALLISON, CARL L	Name	ALLISON, JOAN M
Address	780 SE BAYA DRIVE	Address	780 SE BAYA DRIVE
City-State-Zip:	LAKE CITY FL 32025	City-State-Zip:	LAKE CITY FL 32025

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: JOAN ALLISON

OWNER

04/05/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date