2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2025
Secretary of State
2381288151CC

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Entity Name: THERAPY PATHWAYS LLC

Current Principal Place of Business:

7338 STEER BLADE DRIVE
ZEPHYRHILLS, FL 33541

Current Mailing Address:

7338 STEER BLADE DRIVE
ZEPHRHILLS, FL 33541 US

FEI Number: 88-2684560

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LANE, STEPHANIE
7338 STEER BLADE DRIVE
ZEPHYRHILLS, FL 33541 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	AMBR	Title	AMBR
Name	LANE, STEPHANIE	Name	LANE, ANDREW
Address	7338 STEER BLADE DR	Address	7338 STEER BLADE DR
City-State-Zip:	ZEPHYRHILLS FL 33541	City-State-Zip:	ZEPHYRHILLS FL 33541

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: STEPHANIE LANE OWNER 04/27/2025

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