

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000427522

Entity Name: OAKS CENTER OF THE PALM BEACHES LLC**Current Principal Place of Business:**3825 PGA BLVD SUITE 1003
PALM BEACH GARDENS, FL 33410**Current Mailing Address:**3825 PGA BLVD SUITE 1003
PALM BEACH GARDENS, FL 33410 US**FEI Number:** 65-0936853**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRANDT, PHILLIP
3825 PGA BLVD SUITE 1003
PALM BEACH GARDENS, FL 33410 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
Name	GALUI, JUDITH
Address	3825 PGA BLVD SUITE 1003
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	MGR
Name	STEPHANOS, DIANE
Address	3825 PGA BLVD SUITE 1003
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	MGR
Name	DIVOSTA, CATHY
Address	3825 PGA BLVD SUITE 1003
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	MGR
Name	DIVOSTA, GUY
Address	3825 PGA BLVD SUITE 1003
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	AUTHORIZED REPRESENTATIVE
Name	BRANDT, PHILLIP
Address	3825 PGA BLVD SUITE 1003
City-State-Zip:	PALM BEACH GARDENS FL 33410

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: PHILLIP BRANDT

AR

04/04/2023

Electronic Signature of Signing Authorized Person(s) Detail_____
Date