

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000410182

Entity Name: ABSOLUTE CALM PSYCHIATRY LLC

Current Principal Place of Business:

11721 GOTHIC LN.
TAMPA, FL 33626

Current Mailing Address:

11721 GOTHIC LN.
TAMPA, FL 33626

FEI Number: 93-3382887

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

STORMANNS, LUCY M
11721 GOTHIC LN
TAMPA, FL 33626 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 STORMANNS, LUCY M
Address 11721 GOTHIC LN
City-State-Zip: TAMPA FL 33626

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: STORMANNS, LUCY M

MGR

05/17/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date