

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010429

FILED
Jan 04, 2012
Secretary of State

Entity Name: BLOOMINGDALE PSYCHIATRIC ASSOCIATES, P.L.

Current Principal Place of Business:

336 E BLOOMINGDALE AVE
BRANDON, FL 33511 US

New Principal Place of Business:

Current Mailing Address:

336 E BLOOMINGDALE AVE
BRANDON, FL 33511 US

New Mailing Address:

FEI Number: 59-3736487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEVINE, CHARLES D
336 BLOOMINGDALE AVENUE
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: DEVINE, CHARLES D
Address: 336 E BLOOMINGDALE AVE
City-St-Zip: BRANDON, FL 335118155

Title: MGRM
Name: SUAREZ, AMADO F
Address: 336 E BLOOMINGDALE AVE
City-St-Zip: BRANDON, FL 335118155

Title: MGRM
Name: CARROLL, KATHLEEN M
Address: 336 E BLOOMINGDALE AVE
City-St-Zip: BRANDON, FL 335118155

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: DR. AMADO SUAREZ

MGRM

01/04/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date