

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000041199

**FILED**  
**Jan 17, 2012**  
**Secretary of State**

**Entity Name:** TURNING POINT COUNSELING CENTER, LLC

**Current Principal Place of Business:**

1965 42ND AVENUE STE 5  
VERO BEACH, FL 32960 US

**New Principal Place of Business:**

1511 53RD AVE.  
VERO BEACH, FL 32966 US

**Current Mailing Address:**

1511 53RD AVE.  
VERO BEACH, FL 32966

**New Mailing Address:**

**FEI Number:** 26-4793976      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AMICO, MARILYN  
1511 53RD AVENUE  
VERO BEACH, FL 32966 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:** AMICO, MARILYN  
**Address:** 1511 53RD AVE  
**City-St-Zip:** VERO BEACH, FL 32966 US

**Title:** MGRM  
**Name:** AMICO, GERALD  
**Address:** 1511 53RD AVE  
**City-St-Zip:** VERO BEACH, FL 32966 US

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: MARILYN AMICO      MGRM      01/17/2012

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