

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000106800

FILED
Mar 28, 2012
Secretary of State

Entity Name: A AND R PSYCHIATRIC AND MENTAL HEALTH SERVICES, LLC

Current Principal Place of Business:

2150 WEST MARTIN LUTHER KING BLVD
STE B
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

2150 WEST MARTIN LUTHER KING BLVD
STE B
TAMPA, FL 33607

New Mailing Address:

FEI Number: 32-0351959 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROTH, JUSTIN
2150 WEST MARTIN LUTHER KING BLVD
STE B
TAMPA, FL 33607 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: ROTH, JUSTIN
Address: 2150 WEST MARTIN LUTHER KING BLVD
City-St-Zip: TAMPA, FL 33607

Title: MGR
Name: ROTH, JENNIFER
Address: 2150 WEST MARTIN LUTHER KING BLVD
City-St-Zip: TAMPA, FL 33607

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: JUSTIN ROTH

MGRM

03/28/2012

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