2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762852

Entity Name: DAVID LAWRENCE MENTAL HEALTH CENTER, INC.

FILED
Jan 08, 2025
Secretary of State
6858845080CC

Current Principal Place of Business:

6075 BATHEY LANE NAPLES. FL 34116

Current Mailing Address:

6075 BATHEY LANE NAPLES, FL 34116 US

FEI Number: 59-2206025 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HL STATUTORY AGENT INC. 5811 PELICAN BAY BOULEVARD - STE. 650 NAPLES, FL 34108 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

Officer/Director Detail:

	050055101/	T'0.	VO
City-State-Zip:	NAPLES FL 34116	City-State-Zip:	NAPLES FL 34116
Address	6075 BATHEY LANE	Address	6075 BATHEY LANE
Name	BURGESS, SCOTT	Name	MAGRANN, ROBERT P
Title	PRESIDENT, CEO	Title	DIRECTOR

Title SECRETARY Title VC

NameMORTON, MARYNameEDWARDS, ROBAddress6075 BATHEY LANEAddress6075 BATHEY LANECity-State-Zip:NAPLES FL 34116City-State-Zip:NAPLES FL 34116

Title DIRECTOR Title DIRECTOR
Name VERNON CHRIS Name GROODY, L

NameVERNON, CHRISNameGROODY, LAIRDAddress6075 BATHEY LANEAddress6075 BATHEY LANE

City-State-Zip: NAPLES FL 34116 City-State-Zip: NAPLES FL 34116

TitleDIRECTORTitleTREASURERNameYUN, JEFFREYNameBOYER, ED

Address 6075 BATHEY LANE
City-State-Zip: NAPLES FL 34116
Address 6075 BATHEY LANE
City-State-Zip: NAPLES FL 34116

Continues on page 2

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SCOTT BURGESS PRESIDENT/CEO 01/08/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title CHAIRMAN Title DIRECTOR

NameMORTON, EDWARDNameVARCOE, MARILYN DR.Address6075 BATHEY LANEAddress6075 BATHEY LANECity-State-Zip:NAPLES FL 34116City-State-Zip:NAPLES FL 34116

Title DIRECTOR Title DIRECTOR

NameAGUILERA, JORGENameANTON, ROBERT DR.Address6075 BATHEY LANEAddress6075 BATHEY LANECity-State-Zip:NAPLES FL 34116City-State-Zip:NAPLES FL 34116

Title DIRECTOR Title DIRECTOR

NameGRADY, TOMNameLANSEN, THOMAS DR.Address6075 BATHEY LANEAddress6075 BATHEY LANECity-State-Zip:NAPLES FL 34116City-State-Zip:NAPLES FL 34116

Title DIRECTOR Title DIRECTOR

NameRICHTER, GARRETTNameSPROUL, KATIEAddress6075 BATHEY LANEAddress6075 BATHEY LANECity-State-Zip:NAPLES FL 34116City-State-Zip:NAPLES FL 34116