

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000019977

**Entity Name:** BASSI MENTAL HEALTH PA

**Current Principal Place of Business:**

12058 SAN JOSE BLVD STE 202  
JACKSONVILLE, FL 32223

**Current Mailing Address:**

1820 STATE ROAD 13, STE 11-926  
JACKSONVILLE, FL 32259

**FEI Number:** 82-4049258

**Certificate of Status Desired:** No

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

ANDERSON REGISTERED AGENTS, INC.  
625 E. TWIGGS STREET  
SUITE 110  
TAMPA, FL 33602 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 :**

Title P  
Name BASSI, BRUCE  
Address 1820 STATE ROAD 13 STE 11-926  
City-State-Zip: SAINT JOHNS FL 32259-8856

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BASSI , BRUCE

**AUTHORIZED AGENT**

**04/25/2023**

Electronic Signature of Signing Officer/Director Detail

Date