2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2024
Secretary of State
0233409687CC

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Entity Name: SOLUTIONS FAMILY THERAPY LLC

Current Principal Place of Business:

17862 HUNTING BOW CIRCLE
SUITE 102
LUTZ, FL 33558

Current Mailing Address:

PO BOX 555
ODESSA, FL 33556 US

FEI Number: 27-2395745

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHEPHERDSON, EDWIN A
17862 HUNTING BOW CIRCLE
SUITE 101
LUTZ, FL 33558 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: EDWIN A SHEPHERDSON 04/26/2024

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGRM
Name	SHEPHERDSON, ELAINE K
Address	7617 DUNBRIDGE DR
City-State-Zip:	ODESSA FL 33556

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHEPHERDSON , ELAINE K MGRM 04/26/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date