## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000069241

Entity Name: AVALON TREATMENT CENTERS, LLC

**Current Principal Place of Business:** 

820 EAST PARK AVE BUILDING F SUITE 100 TALLAHASSEE, FL 32301

## **Current Mailing Address:**

820 EAST PARK AVE BUILDING F SUITE 100 TALLAHASSEE, FL 32301 US

FEI Number: 27-0184090 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BURGHOUT, JERRY ADR. 8410 ALTON WENTWORTH, RD. GREENVILLE, FL 32331 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

FILED Feb 20, 2013

**Secretary of State** 

CC1991642539

## Authorized Person(s) Detail:

Title MGRM

Name BURGHOUT, JERRY ADR.

Address 8410 ALTON WENTWORTH RD.

City-State-Zip: GREENVILLE FL 32331

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