

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000083926

Entity Name: NEW DIRECTIONS COUNSELING CENTER, LLC

Current Principal Place of Business:

5121 S. LAKELAND DR
SUITE 4
LAKELAND, FL 33813

FILED
Mar 23, 2018
Secretary of State
CC6155282067

Current Mailing Address:

5121 S. LAKELAND DR
SUITE 4
LAKELAND, FL 33813 US

FEI Number: 27-3213228

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABRAHAM, STEVEN K
5121 S. LAKELAND DR
SUITE 4
LAKELAND, FL 33813 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

Authorized Person(s) Detail :

Title MGRM
Name STEVEN K. ABRAHAM, PSY.D., P.A.
Address 5121 S. LAKELAND DR
SUITE 4
City-State-Zip: LAKELAND FL 33813

Title MGRM
Name CARRIE COOK, LMHC, CEAP, P.A.
Address 5121 S. LAKELAND DR
SUITE 4
City-State-Zip: LAKELAND FL 33813

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: LEAH BEST

OFFICE MANAGER

03/23/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date