

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000001579

Entity Name: SPRUCE CREEK MENTAL HEALTH SERVICES, LLC

Current Principal Place of Business:

6117 DEL RIO DRIVE
PORT ORANGE, FL 32127

Current Mailing Address:

6117 DEL RIO DRIVE
PORT ORANGE, FL 32127 US

FEI Number: 46-1680921

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KING, EDWARD
6117 DEL RIO DRIVE
PORT ORANGE, FL 32127 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	Title	MGRM
Name	KING, SHANNON	Name	KING, EDWARD
Address	164 AVOCET COURT	Address	6117 DEL RIO DRIVE
City-State-Zip:	DAYTONA BEACH FL 32119	City-State-Zip:	PORT ORANGE FL 32127

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: EDWARD KING

OWNER

04/04/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date