2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 13, 2017
Secretary of State
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Entity Name: CROSSROADS THERAPY, LLC

Current Principal Place of Business:

333 9TH STREET
ATLANTIC BEACH, FL 32233

Current Mailing Address:

333 9TH STREET
ATLANTIC BEACH, FL 32233 US

FEI Number: 81-4264124

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GORDON, KELLY S
333 9TH STREET
ATLANTIC BEACH, FL 32233 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	MGR
Name	GORDON, KELLY S
Address	333 9TH STREET
City-State-Zip:	ATLANTIC BEACH FL 32233

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: KELLY GORDON MANAGER 03/13/2017

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