

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000099698

**Entity Name:** STREAMS OF HOPE COUNSELING, LLC

**Current Principal Place of Business:**

4575 SW 42ND ST  
OCALA, FL 34474

**Current Mailing Address:**

4575 SW 42ND ST  
OCALA, FL 34474 US

**FEI Number:** 82-1441252

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GOYCO, SONJA L  
4575 SW 42ND ST  
OCALA, FL 34474 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:** SONJA GOYCO

03/21/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AR  
Name GOYCO, ROBERTO  
Address 4575 SW 42ND ST  
City-State-Zip: OCALA FL 34474

*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:** GOYCO, ROBERTO

REGISTERED AGENT

03/21/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date