

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000116089

Entity Name: COASTAL COUNSELING FLORIDA LLC

Current Principal Place of Business:

801 CLEMENT DRIVE
PANAMA CITY, FL 32409

Current Mailing Address:

P.O. BOX 1993
LYNN HAVEN, FL 32444 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BENSON, MELISSA S
801 CLEMENT DRIVE
PANAMA CITY, FL 32409 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 AMBR
Name BENSON, MELISSA S
Address 801 CLEMENT DRIVE
City-State-Zip: PANAMA CITY FL 32409

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: MELISSA S BENSON

AMBR

01/21/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date