

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000133841

Entity Name: FLAGLER PSYCHIATRIC ASSOCIATES LLC

Current Principal Place of Business:

6277 A1A S.
UNIT 202
ST. AUGUSTINE, FL 32080

Current Mailing Address:

6277 A1A S.
UNIT 202
ST. AUGUSTINE, FL 32080 US

FEI Number: 82-1952875

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LACY, BENJAMIN W V
6097 AJO RD
ST AUGUSTINE, FL 32080 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 LACY, BENJAMIN V
Address 6097 AJO RD
City-State-Zip: ST AUGUSTINE FL 32080

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: BENJAMIN LACY

02/10/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date