## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000198433

Entity Name: ST JOHN'S RECOVERY PLACE, LLC

**Current Principal Place of Business:** 

1125 N SUMMIT STREET CRESCENT CITY, FL 32112

**Current Mailing Address:** 

5790 POWERLINE ROAD

FORT LAUDERDALE. FL 33309 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUHADANA, SHIMON 5790 POWERLINE RD FORT LAUDERDALE, FL 33309 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: SHIMON BUHADANA 02/28/2022

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGRM

Name BUHADANA, SHIMON Address 5790 POWERLINE RD

City-State-Zip: FORT LAUDERDALE FL 33309

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.

**MGRM** 

SIGNATURE: SHIMON BUHADANA

Electronic Signature of Signing Authorized Person(s) Detail

02/28/2022

FILED Feb 28, 2022

**Secretary of State** 

2499500580CC

Date