## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000233701

Entity Name: A & P PSYCHIATRIC SERVICES PLLC

555 S COLORADO AVE SUITE 111-A STUART, FL 34994

**Current Principal Place of Business:** 

## **Current Mailing Address:**

555 S COLORADO AVE SUITE 111-A STUART, FL 34994 US

FEI Number: 83-2128978 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PASTOR, GOLBOIS, EBERT, & PALLADINO CPA 8198 S JOG ROAD SUITE 103 BOYNTON BEACH, FL 33472 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: JEFFREY H. GOLBOIS 02/14/2024

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

Name ACOSTA-LEON, EFRAIN Name PARALITICI-MORALES, MARIEL

555 S COLORADO AVE 555 S COLORADO AVE Address Address

111-A

City-State-Zip: STUART FL 34994 City-State-Zip: STUART FL 34994

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.

SUITE 111-A

**FILED** Feb 14, 2024

**Secretary of State** 

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