

2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L18000239498

Entity Name: MENTAL HEALTH OF CENTRAL FLORIDA, LLC

Current Principal Place of Business:

15 DIAMOND RIDGE WAY
OCALA, FL 34472

Current Mailing Address:

15 DIAMOND RIDGE WAY
OCALA, FL 34472 US

FEI Number: 83-2262670

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERRER HOPGOOD, IVONNE M
15 DIAMOND RIDGE WAY
OCALA, FL 34472 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 MGR
Name FERRER, IVONNE M
Address 15 DIAMOND RIDGE WAY
City-State-Zip: OCALA FL 34472

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: IVONNE FERRER

MANAGER

08/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date