

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000003863

Entity Name: ROBERT C. SIMPSON, PH.D., LMFT, LLC

Current Principal Place of Business:

2907 KERRY FOREST PARKWAY
TALLAHASSEE, FL 32309

Current Mailing Address:

6110 OLD WATER OAK ROAD
TALLAHASSEE, FL 32312

FEI Number: 83-4400451

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIMPSON, ROBERT C
6110 OLD WATER OAK ROAD
TALLAHASSEE, FL 32312 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 SIMPSON, ROBERT C PH.D.
Address 6110 OLD WATER OAK ROAD
City-State-Zip: TALLAHASSEE FL 32312

Title MGR
Name SIMPSON, CONSTANCE P
Address 6110 OLD WATER OAK ROAD
City-State-Zip: TALLAHASSEE FL 32312

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: ROBERT C. SIMPSON

MGR

04/28/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date