

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000086096

Entity Name: LIGHTHOUSE PSYCHIATRY LLC

Current Principal Place of Business:

1290 NW HONEY LAKE RD
GREENVILLE, FL 32331

Current Mailing Address:

1290 NW HONEY LAKE RD
GREENVILLE, FL 32331

FEI Number: 83-4173253

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BENZIO, KARL
1290 NW HONEY LAKE RD
GREENVILLE, FL 32331 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 BENZIO, KARL
Address 1290 NW HONEY LAKE RD
City-State-Zip: GREENVILLE FL 32331

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: KARL BENZIO

MANAGER

03/10/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date