## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000192985

Entity Name: DAILEY THERAPY, LLC

**Current Principal Place of Business:** 

106 SAILORS COVE DR PORT ST. JOE. FL 32456

**Current Mailing Address:** 

113 GULF TERRACE LANE PORT ST. JOE, FL 32456

FEI Number: 84-2996473 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAILEY, MATTHEW R 113 GULF TERRACE LANE PORT ST. JOE, FL 32456 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

FILED Feb 10, 2025

**Secretary of State** 

4818416109CC

Authorized Person(s) Detail:

Title MGR Title MGR

NameDAILEY, NAKIA TNameDAILEY, MATTHEW RAddress113 GULF TERRACE LANEAddress113 GULF TERRACE LANECity-State-Zip:PORT ST. JOE FL 32456City-State-Zip:PORT ST. JOE FL 32456

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: NAKIA DAILEY MGR 02/10/2025