2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2021
Secretary of State
5391069871CC

DOCUMENT# L20000122182

Entity Name: SHOALVIEW THERAPY, LLC

Current Principal Place of Business:

6688 SCHOONER BAY CIR
SARASOTA, FL 34231

Current Mailing Address:

POST OFFICE BOX 17276
SARASOTA, FL 34276-0276 US

FEI Number: 85-3487144

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DECKER, CHRISTI W.
6688 SCHOONER BAY CIR
SARASOTA, FL 34231 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	AMBR
Name	DECKER, CHRISTI W.
Address	POST OFFICE BOX 17276
City-State-Zip:	SARASOTA FL 34276-0276

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: CHRISTI W. DECKER AMBR 04/26/2021

Electronic Signature of Signing Authorized Person(s) Detail — Date