

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000224643

Entity Name: BLUEBIRD COUNSELING CENTER, LLC

Current Principal Place of Business:

1529 CASTILE ST
CELEBRATION, FL 34747

Current Mailing Address:

1529 CASTILE ST
CELEBRATION, FL 34747

FEI Number: 83-2674647

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHOW, ANNE B
1529 CASTILE ST
CELEBRATION, FL 34747 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 CHOW, ANNE B LMHC
Address 1529 CASTILE ST
City-State-Zip: CELEBRATION FL 34747

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: ANNE BEVERLY CHOW

LMHC

04/09/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date