2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 05, 2021
Secretary of State
0374600795CC

DOCUMENT# L20000317668

Entity Name: 5BY5 PERFORMANCE THERAPY LLC

Current Principal Place of Business:

13 LAKESHORE DR.
SHALIMAR, FL 32579

Current Mailing Address:

13 LAKESHORE DR.
SHALIMAR, FL 32579 UN

FEI Number: 85-3498386

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BYRNE, JENNIFER E
13 LAKESHORE DR.
SHALIMAR, FL 32579 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	Title	MGR
Name	BYRNE, JENNIFER E	Name	BYRNE, JAMES G JR.
Address	13 LAKESHORE DR.	Address	13 LAKESHORE DR.
City-State-Zip:	SHALIMAR FL 32579	City-State-Zip:	SHALIMAR FL 32579

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: JENNIFER ELLEN BYRNE — OWNER 5BY5 PERFORMANCE THERAPY — 02/05/2021

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