

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000051025

Entity Name: SEA ISLANDS THERAPY GROUP LLC

Current Principal Place of Business:

2905 FRUITWOOD LANE
JACKSONVILLE, FL 32277

Current Mailing Address:

P. O. BOX 8104
JACKSONVILLE, FL 32239 US

FEI Number: 86-2229611

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BRYANT, CHRISTINA
2905 FRUITWOOD LANE
JACKSONVILLE, FL 32277 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 AP
Name BRYANT, CHRISTINA D
Address 2905 FRUITWOOD LANE
City-State-Zip: JACKSONVILLE FL 32277

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: CHRISTINA BRYANT

OWNER

05/01/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date