

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000378142

Entity Name: STS THERAPY MANAGEMENT LLC

Current Principal Place of Business:

214 ANNABELLE WAY
DAVENPORT, FL 33837

Current Mailing Address:

214 ANNABELLE WAY
DAVENPORT, FL 33837 UN

FEI Number: 92-0439819

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAMERON, NATASHA M
214 ANNABELLE WAY
DAVENPORT, FL 33837 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 CAMERON, NATASHA
Address 214 ANNABELLE WAY
City-State-Zip: DAVENPORT FL 33837

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: NATASHA CAMERON

04/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date