

**2026 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000285793

**Entity Name:** TURNING POINT OF TAMPA, LLC

**Current Principal Place of Business:**

6227 SHELDON RD  
TAMPA, FL 33615

**Current Mailing Address:**

6227 SHELDON RD  
TAMPA, FL 33615 US

**FEI Number: 72-1091178**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

TURNING POINT BH LLC  
6227 SHELDON RD  
TAMPA, FL 33615 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 PHILIPSON, AVI  
Address 270 SYLVAN AVE  
STE 2260  
City-State-Zip: ENGLEWOOD CLIFFS NJ 07632

Title AMBR  
Name TURNING POINT BH LLC  
Address 270 SYLVAN AVENUE  
STE 2255  
City-State-Zip: ENGLEWOOD CLIFFS NJ 07632

*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: AVI PHILIPSON**

**MEMBER**

**02/10/2026**

Electronic Signature of Signing Authorized Person(s) Detail

Date