

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F23000000693

Entity Name: CATALYST MENTAL HEALTH, INC.

Current Principal Place of Business:

7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702

Current Mailing Address:

7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702 US

FEI Number: 45-4329060

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORTHWEST REGISTERED AGENT LLC
7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702 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

Officer/Director Detail :

Title PRESIDENT
Name TOWNES, DAVID
Address 1915 LYNDAL AVE S
City-State-Zip: MINNEAPOLIS MN 55403

Title SECRETARY
Name TOWNES, DAVID
Address 1915 LYNDAL AVE S
City-State-Zip: MINNEAPOLIS MN 55403

Title TREASURER
Name TOWNES, DAVID
Address 1915 LYNDAL AVE S
City-State-Zip: MINNEAPOLIS MN 55403

Title DIRECTOR
Name TOWNES, DAVID
Address 1915 LYNDAL AVE S
City-State-Zip: MINNEAPOLIS MN 55403

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID TOWNES

PRESIDENT

02/02/2024

Electronic Signature of Signing Officer/Director Detail

Date