



BA20231746915



**STATE OF CALIFORNIA**  
*Office of the Secretary of State*  
**STATEMENT OF INFORMATION**  
**CORPORATION**

California Secretary of State  
1500 11th Street  
Sacramento, California 95814  
(916) 653-3516

For Office Use Only

**-FILED-**

File No.: BA20231746915

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Entity Details			
Corporation Name		Lisa Stekert, LCSW, Licensed Clinical Social Worker, Inc.	
Entity No.		5929947	
Formed In		CALIFORNIA	
Street Address of Principal Office of Corporation			
Principal Address		600 NORTH LAKE BOULEVARD SUITE M TAHOE CITY, CA 96145	
Mailing Address of Corporation			
Mailing Address		P.O. BOX 573 CARNELIAN BAY, CA 96140	
Attention			
Street Address of California Office of Corporation			
Street Address of California Office		None	
Officers			
Officer Name	Officer Address	Position(s)	
+ Lisa Stekert	PO BOX 573 CARNELIAN BAY, CA 96140	Chief Executive Officer, Secretary, Chief Financial Officer	
Additional Officers			
Officer Name	Officer Address	Position	Stated Position
None Entered			
Directors			
Director Name	Director Address		
+ Lisa Stekert	PO BOX 573 CARNELIAN BAY, CA 96140		
The number of vacancies on Board of Directors is: 0			
Agent for Service of Process			
Agent Name		Lisa Stekert	
Agent Address		600 NORTH LAKE BOULEVARD SUITE M TAHOE CITY, CA 96145	
Type of Business			
Type of Business		Psychotherapy	
Email Notifications			
Opt-in Email Notifications		Yes, I opt-in to receive entity notifications via email.	
Labor Judgment			
No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code.			

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

Lisa Stekert

Signature

11/15/2023

Date