## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000953

Entity Name: COLLABORATIVE FAMILY LAW INSTITUTE, INC.

**FILED** Apr 03, 2024 **Secretary of State** 7655828841CC

## **Current Principal Place of Business:**

450 N. PARK ROAD SUITE 600A

HOLLYWOOD, FL 33021

## **Current Mailing Address:**

450 N. PARK ROAD SUITE 600A HOLLYWOOD, FL 33021 US

FEI Number: 65-0995710 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

FISCHER, REBECCA H. ESQ. 450 N. PARK ROAD SUITE 600A HOLLYWOOD, FL 33021 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: REBECCA H. FISCHER 04/03/2024

> Date Electronic Signature of Registered Agent

> > Title

Title

SUITE 600A

**SECRETARY** 

Officer/Director Detail:

Title Title **PRESIDENT** 

Name REBOREDO, LIZETTE Name FISCHER, REBECCA 7340 SOUTHWEST 90TH STREET Address Address 450 N. PARK ROAD

City-State-Zip: MIAMI FL 33156 City-State-Zip: HOLLYWOOD FL 33021

Title **PRESIDENT** 

**TREASURER** SAKETKOO, CANDICE Name Name HERZBERG, PHILIP

22 NW CORPORATE BLVD. Address Address 4400 BISCAYNE BLVD. SUITE 406

SUITE 514

BOCA RATON FL 33431

City-State-Zip: City-State-Zip: MIAMI FL 33137

Title VΡ

FUCHS, RONDA Name FUCHS, RONDA Name

300 ARTHUR GODFREY ROAD Address 300 41ST STREET Address SUITE 213

**SUITE 213** City-State-Zip: MIAMI BEACH FL 33140

City-State-Zip: MIAMI BEACH FL 33140

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

04/03/2024 SIGNATURE: REBECCA HOPE FISCHER **PRESIDENT**