### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006538

Entity Name: THE ALLIANCE FOR EATING DISORDERS AWARENESS, INC.

**FILED** Apr 17, 2017 **Secretary of State** CC1910058420

# **Current Principal Place of Business:**

1649 FORUM PLACE

STE. 2

WEST PALM BEACH, FL 33401

## **Current Mailing Address:**

1649 FORUM PLACE

STE. 2

WEST PALM BEACH, FL 33401 US

FEI Number: 65-1080905 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

GLYNN, SHARON M 7251 VIA GENOVA

DELRAY BEACH, FL 33446 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: SHARON GLYNN 04/17/2017

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

VICE CHAIR Title Title DIRECTOR

Name BLOSSER, JAMIE Name SEELIG, REBECCA Address 831 SOUTHWEST 16TH COURT Address 7 GLENGARY ROAD

PALM BEACH GARDENS FL 33418 City-State-Zip: FT. LAUDERDALE FL 33315 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name MONARCH, CHERIE Name MARI, LORRIANE DR.

2820 MEADOWVIEW COURT Address 2700 NORTH OCEAN DRIVE #1402 Address City-State-Zip: TARPON SPRINGS FL 34688 City-State-Zip: SINGER ISLAND FL 33404

CEO Title Title **CHAIRMAN** 

Name KANDEL, JOHANNA Name WYPYCH, LEAH

Address 2829 EMBASSY DRIVE Address 403 SOUTH SAPODILLA AVENUE

#PH1-17

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33401

**DIRECTOR** Title Title **DIRECTOR** Name **BUSH. GILLIAN** 

Name PAULINO-GRISHAM, ALICIA

Address 540 GREENWAY DRIVE Address 14255 U.S. HIGHWAY ONE

SUITE 235

JUNO BEACH FL 33408 City-State-Zip: Continues on page 2

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.

City-State-Zip:

04/17/2017 SIGNATURE: JOHANNA S. KANDEL CEO

NORTH PALM BEACH FL 33408

## Officer/Director Detail Continued:

TitleDIRECTORTitleTREASURERNameKAHN, KENNETHNameFOX, ARTHURAddress12217 COCONUT ROW ROADAddress167 VIERA DRIVE

City-State-Zip: PALM BEACH GARDENS FL 33410 City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR Title DIRECTOR

Name RIFKIN, JUDY Name CARLISI, NICOLE

Address 211 BEARS CLUB DRIVE Address 153 CAT ROCK LANE

City-State-Zip: JUPITER FL 33477 City-State-Zip: JUPITER FL 33458

Title DIRECTOR Title DIRECTOR

Name VALENTE, FRANK Name LATOUR, MARTI

Address 1G LEXINGTON LANE EAST Address 1320 NORTH OCEAN BLVD

City-State-Zip: PALM BEACH GARDENS FL 33418 City-State-Zip: DELRAY BEACH FL 33483