

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000003611

**Entity Name:** FAMILY IN DISTRESS, INC.**Current Principal Place of Business:**3800 INVERRARY BLVD.  
# 400 F  
FT. LAUDERDALE, FL 33319**Current Mailing Address:**10910 LAKEMORE LANE  
# 201  
BOCA RATON, FL 33498 US**FEI Number:** 90-0725205**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WHITE, CHERYL A  
10910 LAKEMORE LANE  
# 201  
BOCA RATON, FL 33498 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 EXECUTIVE DIRECTOR, PRESIDENT  
Name WHITE, CHERYL A  
Address 10910 LAKEMORE LANE  
# 201  
City-State-Zip: BOCA RATON FL 33498Title DIRECTOR, VP  
Name HOLT, ALAN  
Address 10910 LAKEMORE LANE  
# 201  
City-State-Zip: BOCA RATON FL 33498Title S/D  
Name COOMBS, NICHOLE  
Address 10910 LAKEMORE LANE  
# 201  
City-State-Zip: BOCA RATON FL 33498Title T/D  
Name COOMBS, COURTNEY  
Address 10910 LAKEMORE LANE  
# 201  
City-State-Zip: BOCA RATON FL 33498Title DIRECTOR  
Name COLQUHOUN, SHARIFA  
Address 10910 LAKEMORE LANE  
# 201  
City-State-Zip: BOCA RATON FL 33498

*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.*

**SIGNATURE:** DR. CHERYL WHITE**PRESIDENT****03/28/2022**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date