2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000009988

Entity Name: ADVANCED ORTHOGONAL INSTITUTE, INC.

Current Principal Place of Business:

2201 62ND AVE N
ST. PETERSBURG, FL 33702

Current Mailing Address:

2201 62ND AVE N
ST. PETERSBURG, FL 33702 US

FEI Number: 47-2166489

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHAR, NICHOLAS H
6029 ROLLING VISTA LOOP
DOVER, FL 33527 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: NICHOLAS H SCHAR   01/30/2022

Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	PRES		Title	VP
Name	PIERCE, G. STANFORD SR.		Name	FOWLER, JEFFREY
Address	2201 62ND AVE N		Address	108 W HIGHLAND BLVD
City-State-Zip:	ST. PETERSBURG FL 33702		City-State-Zip:	INVERNESS FL 34452
Title	TREASURER		Title	D
Name	SCHAR, NICHOLAS		Name	SLININGER, CHRIS
Address	9280 BAY PLAZA BLVD STE. 725		Address	2201 62ND AVE N
City-State-Zip:	TAMPA FL 33619		City-State-Zip:	ST. PETERSBURG FL 33702
Title	SECRETARY		Title	D
Name	LYTER, KEVIN		Name	COLLINS, CHRIS
Address	1720 S 72ND ST		Address	412 SE OSCEOLA ST.
City-State-Zip:	TACOMA WA 98408		City-State-Zip:	STUART FL 34994
Title	DIRECTOR			
Name	ATKINS, PETER			
Address	2621 70TH AVE W SUITE A			
City-State-Zip:	UNIVERSITY PLACE WA 98466			

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: NICHOLAS SCHAR   TREASURER   01/30/2022

Electronic Signature of Signing Officer/Director Detail   Date