## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000002745

Entity Name: PATIENCE WITH PATIENTS, INC.

**Current Principal Place of Business:** 

9883 PIONEER RD

WEST PALM BEACH, FL 33411

**Current Mailing Address:** 

9883 PIONEER RD

ROYAL PALM BEACH . FL 33411 US

FEI Number: 81-2279128 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRANT, MELANIE 9883 PIONEER RD

WEST PALM BEACH, FL 33411 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

**FILED** Apr 16, 2024

**Secretary of State** 

8024222324CC

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title TREASURER, DIRECTOR FEARON, BARBARA LOBBAN, NORMAN A. Name Name

11924 W. FOREST HILL BLVD 11924 W. FOREST HILL BLVD Address Address SUITE 10A-426

**SUITE 10A-426** 

City-State-Zip: WELLINGTON FL 33414 City-State-Zip: WELLINGTON FL 33414

Title VP, DIRECTOR Title EXECUTIVE DIRECTOR, DIRECTOR

Name DUHANEY, RUTH Name GRANT, MELANIE

11924 W. FOREST HILL BLVD 9883 PIONEER RD Address Address

SUITE 10A-426

City-State-Zip: ROYAL PALM BEACH FL 33411 WELLINGTON FL 33414 City-State-Zip:

Title **SECRETARY** 

Name NEUFVILLE, SUTANYA

3378 NORTHWEST 11TH AVENUE Address POMPANO BEACH FL 33064 City-State-Zip:

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.

04/16/2024 SIGNATURE: MELANIE GRANT **MANAGER**