

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000004557

Entity Name: OCD CENTRAL AND SOUTH FLORIDA, INC.

Current Principal Place of Business:

730 S. STERLING AVE
SUITE 216
TAMPA, FL 33609

Current Mailing Address:

4322 S. HALE AVE
TAMPA, FL 33611 US

FEI Number: 81-2586247

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NOEL, NATALIE R
4322 SOUTH HALE AVENUE
TAMPA, FL 33611 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 P
Name NOEL, NATALIE R LMHC
Address 4322 SOUTH HALE AVENUE
City-State-Zip: TAMPA FL 33611

Title VP
Name JACOB, MARNI L PH.D.
Address 1200 N. FEDERAL HIGHWAY, SUITE 200
City-State-Zip: BOCA RATON FL 33432

Title T
Name BRAND, JOSEPH PH.D.
Address 131 SOUTH FEDERAL HIGHWAY, APARTMENT 632
City-State-Zip: BOCA RATON FL 33432

Title CO-S
Name STEWART, LINDSAY PH.D.
Address 915 MIDDLE RIVER DRIVE, SUITE 408
City-State-Zip: FORT LAUDERDALE FL 33304

Title CO-S
Name DACH, KARINA M.S.
Address 1421 SOUTHEAST 4 AVENUE, SUITE B
City-State-Zip: FORT LAUDERDALE FL 33316

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: NATALIE NOEL

PRESIDENT

03/09/2017

Electronic Signature of Signing Officer/Director Detail

Date