2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000001000

Entity Name: REBEL RECOVERY FLORIDA INC

Current Principal Place of Business:

400 N CONGRESS AVE **SUITE 130**

WEST PALM BEACH, FL 33401

Current Mailing Address:

400 N CONGRESS AVE **STE 130**

WEST PALM BEACH, FL 33401 US

FEI Number: 81-5190566 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REBEL RECOVERY FLORIDA INC 400 N CONGRESS AVE SUITE 130 WEST PALM BEACH, FL 33401 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: GEORGEANNE DORNEY 01/25/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title **SECRETARY**

Name MCCONNELL, NANCY Name PROTESTO, CHRISTIN 212 CHARTER WAY 3931 SHERWOOD BLVD Address Address DELRAY BEACH FL 33445 City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip:

Title CFO Title DIRECTOR

Name FREEMAN, WILLIAM DORNEY, GEORGEANNE Name

Address 1501 CALUSA DR APT3-204 Address 1616 13TH AVE N City-State-Zip: BELLE GLADE FL 33430 City-State-Zip: LAKE WORTH FL 33460

Title ٧P Title **PRESIDENT**

MARTINEZ, EMY Name Name SCHILLINGER, BRENT M DR.

Address 11073 CHANDLER DR Address 1320 NW 13TH ST City-State-Zip: COOPER CITY FL 33026 City-State-Zip: DELRAY BEACH FL 33444

Title DIRECTOR

Name HEATHER, HOWARD 902 S FEDERAL HWY Address

UNIT 9

City-State-Zip: LAKE WORTH BEACH FL 33460

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: GEORGEANNE DORNEY

CFO

01/25/2024

FILED Jan 25, 2024

Secretary of State

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