

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

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name MCCONNELL, NANCY
Address 212 CHARTER WAY
City-State-Zip: WEST PALM BEACH FL 33407

Title SECRETARY
Name PROTESTO, CHRISTIN
Address 3931 SHERWOOD BLVD
City-State-Zip: DELRAY BEACH FL 33445

Title CFO
Name DORNEY, GEORGEANNE
Address 1616 13TH AVE N
City-State-Zip: LAKE WORTH FL 33460

Title DIRECTOR
Name FREEMAN, WILLIAM
Address 1501 CALUSA DR APT3-204
City-State-Zip: BELLE GLADE FL 33430

Title PRESIDENT
Name SCHILLINGER, BRENT M DR.
Address 1320 NW 13TH ST
City-State-Zip: DELRAY BEACH FL 33444

Title VP
Name MARTINEZ, EMY
Address 11073 CHANDLER DR
City-State-Zip: COOPER CITY FL 33026

Title DIRECTOR
Name HEATHER, HOWARD
Address 902 S FEDERAL HWY
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

Electronic Signature of Signing Officer/Director Detail

Date