

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000012181

Entity Name: DRA BEHAVIORAL FOUNDATION CORP.**Current Principal Place of Business:**900 SW 142ND AVENUE
L206
PEMBROKE PINES, FL 33027**Current Mailing Address:**900 SW 142ND AVENUE
L206
PEMBROKE PINES, FL 33027 US**FEI Number:** 83-2883638**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAVELO, TOINETTE
403 OCEAN BREEZE
LAKE WORTH, FL 33460 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	RAVELO, DAISY
Address	900 SW 142ND AVENUE L206
City-State-Zip:	PEMBROKE PINES FL 33027

Title	TREASURER
Name	RAVELO, DAISY
Address	900 SW 142ND AVENUE L206
City-State-Zip:	PEMBROKE PINES FL 33027

Title	DIRECTOR
Name	PAZMINO, MARIA L
Address	9684 NW 15TH COURT
City-State-Zip:	PEMBROKE PINES FL 33024

Title	VP
Name	RAVELO, TOINETTE
Address	426 SW 9TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33315
Title	SECRETARY
Name	MONNE, MARK D
Address	900 SW 142ND AVENUE L206
City-State-Zip:	PEMBROKE PINES FL 33027

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: DAISY RAVELO**PRESIDENT****04/06/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date