### **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000008154

Entity Name: INSTITUTE FOR HEALTH EQUITY AND SOCIAL JUSTICE INC

FILED
Aug 09, 2023
Secretary of State
5177062513CC

## **Current Principal Place of Business:**

100 E PINE STREET SUITE 110 ORLANDO, FL 32801

# **Current Mailing Address:**

100 E. PINE STREET SUITE 110 ORLANDO, FL 32801 US

FEI Number: 85-2304631 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

KEMP, DEANDRE 100 E PINE STREET SUITE 110 ORLANDO, FL 32801 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: DEANDRE KEMP 08/09/2023

Electronic Signature of Registered Agent Date

## Officer/Director Detail:

Title CEO, CHAIRMAN Title DIRECTOR Name KEMP, DEANDRE Name VARGA, BERNADETT 100 E PINE STREET Address 100 E PINE STREET Address SUITE 110 **SUITE 110** City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801 Title **DIRECTOR** Title **DIRECTOR** Name ROSENDO, EDISON Name PATEL, JAYNEEL Address 100 E PINE STREET Address 100 E PINE STREET SUITE 110 SUITE 110 City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801 Title DIRECTOR Title DIRECTOR HOLMES, KHRISTEN MERAJ, SAM Name Name 100 E PINE STREET 100 E PINE STREET Address Address **SUITE 110** SUITE 110 City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

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: DEANDRE KEMP

**EXECUTIVE DIRECTOR** 

08/09/2023