

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000008868

**Entity Name:** BRINGING INTIMACY BACK, INC.

**Current Principal Place of Business:**

1404 DEL PRADO BLVD, SUITE 135  
CAPE CORAL, FL 33990

**Current Mailing Address:**

1404 DEL PRADO BLVD, SUITE 135  
CAPE CORAL, FL 33990 US

**FEI Number: 87-1519859**

**Certificate of Status Desired: No**

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

DR. APRIL BROWN  
1404 DEL PRADO BLVD, SUITE 135  
CAPE CORAL, FL 33990 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 PT  
Name DR. APRIL BROWN  
Address 1404 DEL PRADO BLVD, SUITE 135  
City-State-Zip: CAPE CORAL FL 33990

Title VP  
Name DR. KELLY BUSHEY  
Address 1404 DEL PRADO BLVD, SUITE 135  
City-State-Zip: CAPE CORAL FL 33990

Title S  
Name HAYDEN P. LEE  
Address 1404 DEL PRADO BLVD, SUITE 135  
City-State-Zip: CAPE CORAL FL 33990

*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: DR. APRIL BROWN**

**PRESIDENT**

**01/30/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date