

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21249

FILED
Feb 11, 2021
Secretary of State
8459038936CC

Entity Name: CHADD, INC. (CHILDREN & ADULTS WITH ATTENTION-DEFICIT/HYPERACTIVITY DISORDER)

Current Principal Place of Business:

4221 FORBES BLVD.
SUITE 270
LANHAM, MD 20706

Current Mailing Address:

4221 FORBES BLVD.
SUITE 270
LANHAM, MD 20706 US

FEI Number: 59-2817697

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 PRESIDENT
Name HUDAK, PATRICIA M
Address 9179 BROKEN OAK PLACE
City-State-Zip: BURKE VA 22015-3564

Title COO
Name GOWER-GETZ, APRIL
Address 4221 FORBES BLVD.
 SUITE 270
City-State-Zip: LANHAM MD 20706

Title SECRETARY
Name FOY, BRIAN
Address 1711 JORDYN CT.
City-State-Zip: DAVENPORT IA 52807

Title TREASURER
Name O'MALLEY, BOB
Address 36 CHESTNUT HILL ROAD
City-State-Zip: HOWELL NJ 07731-1746

Title DIRECTOR
Name PARKER, HARVEY C
Address 4601 PRESIDENT'S PLACE
 SUITE 300
City-State-Zip: LANHAM MD 20706

Title DIRECTOR
Name WINITZER, MAX
Address NEUROLOGICAL INSTITUTE AT
 UNIVERSITY DIV. OF NEUROLOGY
 11100 EUCLID AVENUE
City-State-Zip: CLEVELAND OH 44106

Title CEO
Name CATTOI, BOB
Address 4221 FORBES BLVD.
 SUITE 270
City-State-Zip: LANHAM MD 20706

Title DIRECTOR
Name OREM, DONNA HYPERACTIVITY
Address 5504 BURLING COURT
City-State-Zip: BETHESDA MD 20817

Continues on page 2

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: APRIL GOWER-GETZ

COO

02/11/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PERRY-JONES, RHASHIDAH
Address 6603 N 12TH STREET
City-State-Zip: PHILADELPHIA PA 19126

Title DIRECTOR
Name VREDENBURG, NICOLE
Address 12190 NW 2ND STREET
City-State-Zip: CORAL SPRINGS FL 33071