

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

DOCUMENT# N22000012833

**Entity Name:** FLB RENAL INSTITUTIONAL FOUNDATION INC

**Current Principal Place of Business:**

4160 TEMESCAL CANYON RD  
SUITE 500  
CORONA, CA 92883

**Current Mailing Address:**

4160 TEMESCAL CANYON RD  
SUITE 500  
CORONA, CA 92883

**FEI Number:** 92-1084408

**Certificate of Status Desired:** Yes

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

ROSBURY, PAUL H  
1773 PINEWOOD RD  
MELBOURNE, FL 32934 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 D,P  
Name LAJOIE, NADINE  
Address 18 55TH PLACE  
City-State-Zip: LONG BEACH CA 90803

Title D,VP  
Name ROSBURY, PAUL H  
Address 1773 PINEWOOD RD  
City-State-Zip: MELBOURNE FL 32934

Title D,CO  
Name DE LA MATTER, CHUCK  
Address 3105 S. RENE DR  
City-State-Zip: SANTA ANA CA 92704

Title D, S  
Name NAONA, VAL  
Address 24856 SUNSTAR LN  
City-State-Zip: DANA POINT CA 92629

Title D  
Name SOURAPAS, MICHAEL  
Address 112 N JUNE ST  
City-State-Zip: LOS ANGELES CA 90210

*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:** NADINE LAJOIE

**PRESIDENT**

**03/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date