# 2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N94000004772

Entity Name: GOOD HEALTH FOUNDATION, INC.

**FILED** May 29, 2019 **Secretary of State** 9893666332CC

# **Current Principal Place of Business:**

1515 N. FLAGLER DR.

SUITE 101

WEST PALM BEACH, FL 33401

### **Current Mailing Address:**

1515 N. FLAGLER DR.

SUITE 101

WEST PALM BEACH, FL 33401 US

FEI Number: 65-0541467 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

SHAHRIARI, VALERIE 1515 N. FLAGLER DR. SUITE 101 WEST PALM BEACH, FL 33401 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: VALERIE SHAHRIARI 05/29/2019

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title CHAIRMAN Title **SECRETARY** Name SABIN, EDWARD Name BURKE, MICHAEL 1515 N. FLAGLER DR. 1515 N. FLAGLER DR. Address Address

SUITE 101

SUITE 101

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33401

Title **TREASURER** 

Name JOSEPH, BERGERON Address 1515 N. FLAGLER DR.

STE. 101

WEST PALM BEACH FL 33411 City-State-Zip:

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.

Electronic Signature of Signing Officer/Director Detail

05/29/2019