

2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000000684

Entity Name: ALTRUISM IN MEDICINE INSTITUTE CORPORATION

Current Principal Place of Business:

8018 CRUSHED PEPPER AVE.
ORLANDO, FL 32817

Current Mailing Address:

8018 CRUSHED PEPPER AVE.
ORLANDO, FL 32817

FEI Number: 46-4369101

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIGGS, SUSAN
8018 CRUSHED PEPPER AVE.
ORLANDO, FL 32817 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 EXD
Name KERZIN, BARRY MD
Address 257 VALLEY VISTA DRIVE
City-State-Zip: CAMARILLO CA 93010

Title S
Name RIGGS, SUSAN
Address 8018 CRUSHED PEPPER AVE.
City-State-Zip: ORLANDO FL 32817

Title T
Name RIGGS, GARRETT M.D.
Address 8018 CRUSHED PEPPER AVE.
City-State-Zip: ORLANDO FL 32817

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: SUSAN RIGGS

SECRETARY

03/09/2015

Electronic Signature of Signing Officer/Director Detail

Date