

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707228

**FILED
Jun 30, 2020
Secretary of State
3345727611CC**

Entity Name: INSTITUTE FOR CHILD AND FAMILY HEALTH, INC.

Current Principal Place of Business:

15490 N.W. 7TH AVENUE
SUITE 200
MIAMI, FL 33169

Current Mailing Address:

15490 N.W. 7TH AVENUE
SUITE 200
MIAMI, FL 33169 US

FEI Number: 59-0866060

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GEDDES, AINSWORTH
15490 NW 7TH AVE STE 200
MIAMI, FL 33169 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 LANDA, HENRY E
Address C/O ICFH, INC.
 15490 NW 7TH AVENUE SUITE 200
City-State-Zip: MIAMI FL 33169

Title DIRECTOR
Name GRAUPERA, ARMANDO
Address C/O ICFH, INC.
 15490 N.W. 7TH AVENUE SUITE 200
City-State-Zip: MIAMI FL 33169

Title CEO
Name SCHUMER, SUZANNE
Address C/O ICFH, INC.
 15490 N.W. 7TH AVENUE SUITE 200
City-State-Zip: MIAMI FL 33169

Title V
Name MAKAR, STEPHEN J
Address C/O ICFH
 15490 N.W. 7TH AVENUE SUITE 200
City-State-Zip: MIAMI FL 33169

Title TREASURER
Name GARLAND, THOMAS
Address C/O ICFH, INC.
 15490 NW 7TH AVENUE SUITE 200
City-State-Zip: MIAMI FL 33169

Title GENERAL COUNSEL
Name MCGHIE, KAREN
Address C/O ICFH, INC.
 15490 NW 7TH AVENUE SUITE 200
City-State-Zip: MIAMI FL 33169

Title CFO
Name GEDDES, AINSWORTH
Address C/O ICFH, INC.
 15490 NW 7TH AVENUE SUITE 200
City-State-Zip: MIAMI FL 33169

Title SECRETARY
Name JUSTO, MARIA
Address C/O ICFH, INC.
 15490 NW 7TH AVENUE SUITE 200
City-State-Zip: MIAMI FL 33169

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: AINSWORTH GEDDES

CFO

06/30/2020

Electronic Signature of Signing Officer/Director Detail

Date