

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731916

Entity Name: INSTITUTE FOR MEDICAL AND HUMAN RESOURCES, INC.

Current Principal Place of Business:

1161 S. SOUTHLAKE DR.
C/O DR. DORSEY
HOLLYWOOD, FL 33019

Current Mailing Address:

1161 S. SOUTHLAKE DR.
C/O DR. DORSEY
HOLLYWOOD, FL 33019 US

FEI Number: 59-1574136

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DORSEY, JOSEPH EM.D.
1161 S. SOUTHLAKE DR.
HOLLYWOOD, FL 33019 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 PD
Name DORSEY, JOSEPH EMD
Address 1161 S. SOUTHLAKE DR..
City-State-Zip: HOLLYWOOD FL 33019-1933

Title TSD
Name PERKS, GRANT D
Address 1759 MAPLE RIDGE DRIVE
City-State-Zip: MISSISSAUGA, ONT CA L4W2B-5

Title D
Name DORSEY, MARILYN S
Address 1161 S. SOUTHLAKE DR
City-State-Zip: HOLLYWOOD FL 33019

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: MARILYN DORSEY

D

04/29/2019

Electronic Signature of Signing Officer/Director Detail

Date