

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006517

FILED
Feb 04, 2021
Secretary of State
7683304276CC

Entity Name: FLORIDA PUBLIC HEALTH INSTITUTE, INC.

Current Principal Place of Business:

2701 N. AUSTRALIAN AVE.
SUITE 204
WEST PALM BEACH, FL 33407

Current Mailing Address:

2701 N. AUSTRALIAN AVE.
SUITE 204
WEST PALLM BEACH, FL 33407 US

FEI Number: 30-0051514

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KING, RODERICK MD, MPH
2701 N. AUSTRALIAN AVE.
SUITE 204
WEST PALM BEACH, FL 33407 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: RODERICK KING, MD, MPH

02/04/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name ALONSO, ALINA MD
Address 800 CLEMATIS STREET
City-State-Zip: WEST PALM BEACH FL 33401

Title SECRETARY
Name DENNIS, MD, MICHAEL
Address 1231 NORTH LAKE WAY
City-State-Zip: PALM BEACH FL 33480

Title CEO
Name KING, MD, MPH, RODERICK
Address 2701 N. AUSTRALIAN AVE.
SUITE 204
City-State-Zip: WEST PALM BEACH FL 33407

Title OFFICER
Name VILLALTA, YESENIA DR.
Address 8323 NW 12TH STREET
SUITE 212
City-State-Zip: MIAMI FL 33126

Title OFFICER
Name HOWELL, JAMES DR.
Address 3200 S. UNIVERSITY DRIVE
City-State-Zip: FORT LAUDERDALE FL 33328

Title OFFICER
Name GILMORE, KAREN
Address 9100 NW 36 STREET
City-State-Zip: MIAMI FL 33178

Title OFFICER
Name CATALANOTTO, SARAH
Address 14646 NW 151ST BLVD.
City-State-Zip: ALACHUA FL 32615

Title OFFICER
Name MCCOY, CLYDE DR.
Address 219 NW 12TH AVE
APT. 612
City-State-Zip: MIAMI FL 33128

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: ALINA ALONSO

BOARD CHAIR

02/04/2021

Electronic Signature of Signing Officer/Director Detail

Date