

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007679

Entity Name: COMMITTED TO A CURE, INC.

Current Principal Place of Business:

716 CHARMWOOD DRIVE
ST AUGUSTINE, FL 32086

Current Mailing Address:

1093 A1A BEACH BLVD.
PMB 385
ST AUGUSTINE, FL 32080

FEI Number: 54-2130408

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADELFIG, LORI A
716 CHARMWOOD DRIVE
ST AUGUSTINE, FL 32086 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 T
Name ADELFIG, LORI A
Address 1093 A1A BEACH BLVD. PMB 385
City-State-Zip: ST AUGUSTINE FL 32080

Title T
Name DAVID, MAY
Address 1093 A1A BEACH BLVD. PMB 385
City-State-Zip: ST AUGUSTINE FL 32080

Title T
Name DAVID, JOHN
Address 1093 A1A BEACH BLVD. PMB 385
City-State-Zip: ST AUGUSTINE FL 32080

Title T
Name RESNICK, CHRISTINE
Address 1093 A1A BEACH BLVD. #385
City-State-Zip: ST AUGUSTINE FL 32080

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: LORI ADELFIG

T

04/27/2015

Electronic Signature of Signing Officer/Director Detail

Date