

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04224

**Entity Name:** THE ARTHRITIS RESEARCH INSTITUTE OF AMERICA, INC.

**Current Principal Place of Business:**

2240 BELLEAIR RD  
100  
CLEARWATER, FL 33764

**Current Mailing Address:**

2240 BELLEAIR RD  
100  
CLEARWATER, FL 33764 US

**FEI Number:** 59-2438325

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BARRETT SKELLY, MICHELE  
2240 BELLEAIR RD  
100  
CLEARWATER, FL 33764 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:** MICHELE BARRETT SKELLY

04/11/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SKELLY, MICHELE  
Address        2240 BELLEAIR RD  
                  100  
City-State-Zip: CLEARWATER FL 33764

Title            DIRECTOR  
Name            SKELLY, THOMAS  
Address        2240 BELLEAIR RD  
                  100  
City-State-Zip: CLEARWATER FL 33764

Title            DIRECTOR  
Name            ERIKA, BARRETT  
Address        2240 BELLEAIR RD  
                  100  
City-State-Zip: CLEARWATER FL 33764

*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:** MICHELE BARRETT SKELLY

**PRESIDENT**

04/11/2025

Electronic Signature of Signing Officer/Director Detail

Date