

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003383

Entity Name: CLINICS CAN HELP, INC.**Current Principal Place of Business:**2560 WESTGATE AVE
WEST PALM BEACH, FL 33409**Current Mailing Address:**2560 WESTGATE AVE
WEST PALM BEACH, FL 33409 US**FEI Number:** 20-2778895**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**O'NEILL, OWEN
2560 WESTGATE AVE
WEST PALM BEACH, FL 33409 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 CEO
Name O'NEILL, OWEN A CHIEF EXECUTIVE OFFICER
Address 2560 WESTGATE AVE
City-State-Zip: WEST PALM BEACH FL 33409

Title VC
Name PIZZO, JASON
Address 120 NORTH FEDERAL HWY
City-State-Zip: LAKE WORTH FL 33462

Title CHAIRMAN
Name JONATHAN, LEVY T ESQ.
Address 1401 FORUM WAY, 6TH FLOOR
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name GAST, ALLEN
Address 333 SOUTHERN BLVD
City-State-Zip: WEST PALM BEACH FL 33405

Title DIRECTOR
Name LUBLINER, RICHARD ESQ.
Address 1645 PALM BEACH LAKES BLVD SUITE 800
City-State-Zip: WEST PALM BEACH FL 33401

Title SECRETARY
Name SWENSEN, PAMELA
Address 10761 WATERFORD PLACE 201
City-State-Zip: WEST PALM BEACH FL 33412

Title DIRECTOR
Name DESPINA, HALL PT
Address 10553 MAPLE CHASE DRIVE
City-State-Zip: BOCA RATON FL 33498

Title DIRECTOR
Name HOLLOWAY, KAREN
Address 2560 WESTGATE AVE
City-State-Zip: WEST PALM BEACH FL 33409

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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: OWEN O'NEILL

CEO

03/31/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	TREASURER
Name	DAVIS, AARON
Address	767 CRESCENT WAY
City-State-Zip:	WESTON FL 33326