2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 24, 2024
Secretary of State
2859550481CC

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: Yes

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

Title	VC
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

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

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

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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 07/24/2024

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	FORMAN, WILLIAM RANDOLPH ESQ.
Address	618 US HIGHWAY 1
City-State-Zip:	NORTH PALM BEACH FL 33408

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

Title	DIRECTOR
Name	WELLINGTON, JUDY ANN DR.
Address	5305 GREENWOOD AVENUE SUITE 202
City-State-Zip:	WEST PALM BEACH FL 33407