2019 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:

120 NORTH FEDERAL HWY

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:

Date Electronic Signature of Registered Agent

Officer/Director Detail :

Title DIRECTOR Title CHAIRMAN

SEIGWORTH, CAROLE D MCMILLAN, ANDREA D. P.A. Name Name

Address 1630 N.W. 18TH AVE. Address 1615 FORUM PLACE

SUITE 500

Title

Title

Address

DELRAY BEACH FL 33445 City-State-Zip: City-State-Zip: WEST PALM BEACH FL 33401

Title CEO

A, OWEN Name

Name LUBLINER, RICHARD ESQ. Address 2560 WESTGATE AVE

1645 PALM BEACH LAKES BLVD Address City-State-Zip: WEST PALM BEACH FL 33409 SUITE 800

City-State-Zip: WEST PALM BEACH FL 33401

Title **TREASURER**

Name PIZZO, JASON Name STEIN, DAVID CPA

1555 PALM BEACH LAKES BLVD Address City-State-Zip: LAKE WORTH FL 33462

City-State-Zip: WEST PALM BEACH FL 33401

Title VC

Address

Title **SECRETARY** AARON, DAVIS J Name

Name ALAN, SALOMON R Address 525 OKEECHOBEE BOULEVARD

WEST PALM BEACH FL 33401

City-State-Zip: 103

City-State-Zip: WEST PALM BEACH FL 33401

1739 EMBASSY DRIVE

DIRECTOR

DIRECTOR

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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.

04/10/2019 SIGNATURE: OWEN A O'NEILL CEO

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 10, 2019

Secretary of State

0544965824CC

Officer/Director Detail Continued:

Title **DIRECTOR** Title DIRECTOR

Name MYERS, ALEXANDER SANDY ESQ. Name SWENSEN, PAMELA

Address 3227 EMBASSY DRIVE Address 10761 WATERFORD PLACE 201

City-State-Zip: WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33412 City-State-Zip:

Title

DIRECTOR

Title **DIRECTOR**

JONATHAN, LEVY T ESQ. Name Name ANDERSON, CALISHA

1401 FORUM WAY, 6TH FLOOR Address

Address 6600 NORTH MILITARY TRAIL City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: BOCA RATON FL 33496

Title DIRECTOR Title DIRECTOR

BROOKS, CHRISTINE ED.D, MSN, ARNP-BC Name Name DESPINA, HALL PT

Address 17 WINWARD ISLE Address 10553 MAPLE CHASE DRIVE

City-State-Zip: PALM BEACH GARDENS FL 33418 City-State-Zip: BOCA RATON FL 33498