

2020 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 CHAIRMAN
Name MCMILLAN, ANDREA D. P.A.
Address 1615 FORUM PLACE
SUITE 500
City-State-Zip: WEST PALM BEACH FL 33401

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

Title DIRECTOR
Name STEIN, DAVID CPA
Address 1555 PALM BEACH LAKES BLVD
City-State-Zip: WEST PALM BEACH FL 33401

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

Title CEO
Name O'NEILL, OWEN A CHIEF EXECUTIVE
OFFICER
Address 2560 WESTGATE AVE
City-State-Zip: WEST PALM BEACH FL 33409

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

Title SECRETARY
Name ALAN, SALOMON R
Address 1739 EMBASSY DRIVE
103
City-State-Zip: WEST PALM BEACH FL 33401

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

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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 A O'NEILL

CEO

06/08/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ANDERSON, CALISHA
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

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

Title DIRECTOR
Name BROOKS, CHRISTINE ED.D, MSN,
 ARNP-BC
Address 17 WINWARD ISLE
City-State-Zip: PALM BEACH GARDENS FL 33418