

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11295

Entity Name: BRAIN INJURY ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

111 N LAKEMONT AVE.
SUITE D
WINTER PARK, FL 32792

Current Mailing Address:

P.O. BOX 1182
WINTER PARK, FL 32790 US

FEI Number: 59-2611863

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JALLAD, JOHNNY
111 N LAKEMONT AVE.
SUITE D
WINTER PARK, FL 32792 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: JOHNNY JALLAD

04/30/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name BECK, MICHAEL
Address P.O. BOX 1182
City-State-Zip: WINTER PARK FL 32790

Title SEC
Name CAUFFIELD, CHRISTINE
Address P.O. BOX 1182
City-State-Zip: WINTER PARK FL 32790

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: MICHAEL BECK

CHAIRMAN

04/30/2025

Electronic Signature of Signing Officer/Director Detail

Date