

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000011525

Entity Name: CONTEMPORARY ORIENTAL MEDICINE FOUNDATION, INC.**Current Principal Place of Business:**1000 NE 16TH AVE, BUILDING F
GAINESVILLE, FL 32601**Current Mailing Address:**1000 NE 16TH AVE, BUILDING F
GAINESVILLE, FL 32601 US**FEI Number:** 46-1540871**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HAYES, MARY J DR.
1000 NE 16TH AVE, BUILDING F
GAINESVILLE, FL 32601 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:** MARY JO HAYES

04/04/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, VP
Name HAMMER, BARBARA
Address 523 61ST STREET
City-State-Zip: OAKLAND CA 94609

Title DIRECTOR, SECRETARY
Name HAYES, MARY JO
Address 2011 NW 22ND ST
City-State-Zip: GAINESVILLE FL 32605-3947

Title DIRECTOR, PRESIDENT
Name SEARS, KATHERINE
Address 4000 TUNLAW RD NW
APT 1125
City-State-Zip: WASHINGTON DC 20007

Title DIRECTOR, TREASURER
Name LIU, STACEY
Address 4522 SW 94TH DR
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name NICHOLS, JAMIN
Address 8975 S HWY A1A
City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR
Name SOLTESZ, TRACY
Address 1730 WEST STREET, SUITE 107
City-State-Zip: ANNAPOLIS MD 21401

Title DIRECTOR
Name DIENER, RYAN
Address HOLISTIC HEALTH ASSOCIATES
603-B W. PATRICK ST.
City-State-Zip: FREDERICK MD 21701

Title DIRECTOR
Name PREGOZEN, NEIL
Address 34 POMEROY LANE
UNIT 5
City-State-Zip: AMHERST MA 01002

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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: MARY JO HAYES

DIRECTOR, SECRETARY 04/04/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LAW, ALISON
Address 4524 SW 105 DRIVE
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name PEVEN, KYE
Address 2221 PRINCE ST
City-State-Zip: BERKELEY CA 94705