

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000005065

**Entity Name:** INTEGRATED HEALTHCARE SYSTEMS RIVIERA, INC**Current Principal Place of Business:**31 W 20TH STREET  
100  
RIVIERA BEACH, FL 33404**Current Mailing Address:**31 W 20TH STREET  
100  
RIVIERA BEACH, FL 33404 US**FEI Number:** 85-1003540**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WOODEN, JAILYA J  
31 W 20TH STREET  
100  
RIVIERA BEACH, FL 33404 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	P
Name	WOODEN, JAILYA J
Address	31 W 20TH STREET
City-State-Zip:	RIVIERA BEACH FL 33404

Title	VP
Name	RAWLEIGH, TAMIKA
Address	31 W 20TH STREET
City-State-Zip:	RIVIERA BEACH FL 33404

Title	T
Name	BROCKETT, CLARENCE
Address	504 WOODBINE WAY, SUITE 504
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	EXECUTIVE DIRECTOR
Name	BROWN FAUST, MONIQUE D PHD
Address	31 W 20TH STREET 100
City-State-Zip:	RIVIERA BEACH FL 33404

Title	SECRETARY
Name	SPENCER, ALIA
Address	3200 SUMMIT BLVD #20066
City-State-Zip:	WEST PALM BEACH FL 33416

Title	DIRECTOR
Name	LEWIS, DIANE DTH
Address	3437 AVENUE O
City-State-Zip:	RIVIERA BEACH FL 33404

Title	DIRECTOR
Name	EVANS, RICHARD
Address	31 W 20TH STREET
City-State-Zip:	RIVIERA BEACH FL 33404

Title	DIRECTOR
Name	GEORGE, JITHIN
Address	31 W 20TH STREET
City-State-Zip:	RIVIERA BEACH FL 33404

**Continues on page 2**

*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:** MONIQUE D BROWN FAUST**EXECUTIVE DIRECTOR****04/28/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	FREEMAN, WILLIAM
Address	31 W 20TH STREET
City-State-Zip:	RIVIERA BEACH FL 33404