

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000005866

**Entity Name:** MENTAL HEALTH AND PSYCHOLOGICAL SUPPORT AND  
MIGRATION SERVICES INC.

**Current Principal Place of Business:**

946 AVE E NE  
WINTER HAVEN, FL 33881

**Current Mailing Address:**

946 AVE E  
WINTER HAVEN, FL 33881 US

**FEI Number:** 85-1205694

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

WARLICK, VLADIMIR STEMONDRICK  
946 AVE E NE  
WINTER HAVEN, FL 33881 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:** VLADIMIR STEMONDRICK WARLICK

01/17/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name WARLICK, VLADIMIR STEMONDRICK  
Address 946 AVE E  
City-State-Zip: WINTER HAVEN FL 33881

Title TRE  
Name LITTLE, DERRICK  
Address 946 AVE E  
City-State-Zip: WINTER HAVEN FL 33881

Title SEC  
Name WILKENSON, JOSEPH  
Address 946 AVE E  
City-State-Zip: WINTER HAVEN FL 33881

*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:** VLADIMIR WARLICK

CEO

01/17/2025

Electronic Signature of Signing Officer/Director Detail

Date