

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000010868

Entity Name: INSTITUTE FOR PSYCHOTHERAPY AND ECONOMIC
DEVELOPMENT, INC

Current Principal Place of Business:

18117 BISCAYNE BLVD
STE 2052
AVENTURA, FL 33160

Current Mailing Address:

18117 BISCAYNE BLVD
STE 2052
AVENTURA, FL 33160

FEI Number: 87-2600185

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOLBERT, KRISTEN A
18117 BISCAYNE BLVD
STE 2052
AVENTURA, FL 33160 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 PRESIDENT
Name TOLBERT, KRISTEN
Address 18117 BISCAYNE BLVD SUITE 2052
City-State-Zip: AVENTURA FL 33160

Title DIRECTOR
Name SWANSON, TAYLOR
Address 18117 BISCAYNE BLVD SUITE 2052
City-State-Zip: AVENTURA FL 33160

Title DIRECTOR
Name TOLBERT, SUSAN
Address 18117 BISCAYNE BLVD SUITE 2052
City-State-Zip: AVENTURA FL 33160

Title DIRECTOR
Name SEAMON, MATTHEW ESQ.
Address 18117 BISCAYNE BLVD
STE 2052
City-State-Zip: AVENTURA FL 33160

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: KRISTEN TOLBERT

PRESIDENT

04/11/2024

Electronic Signature of Signing Officer/Director Detail

Date