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

DOCUMENT# N21000014309

## Entity Name: COVID-19 LONGHAULER ADVOCACY PROJECT, INC.

## **Current Principal Place of Business:**

7200 NW 2ND AVE, UNIT 153 BOCA RATON, FL 33487

## **Current Mailing Address:**

7200 NW 2ND AVE, UNIT 153 BOCA RATON, FL 33487 US

## FEI Number: 88-1861776

# Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC. 476 RIVERSIDE AVE JACKSONVILLE, FL 32202 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

## Officer/Director Detail :

Title	PD	Title	DIRECTOR
Name	BISHOF, KARYN	Name	MCCRAY, NETIA
Address	7200 NW 2ND AVE, UNIT 153	Address	6003 THORNTON LANE
City-State-Zip:	BOCA RATON FL 33487	City-State-Zip:	TALLAHASSEE FL 32308
Title	т	Title	DIRECTOR
Name	CLARK, MICHAEL	Name	COOMBS, KRISTA
Address	36 S WILLOW ST	Address	2190 SOUTH STREAM ROAD
City-State-Zip:	MONTCLAIR NJ 07042	City-State-Zip:	BENNINGTON VT 05201
Title	SECRETARY		
Name	TODD, KENNETH		
Address	328 W 86TH ST 12C		
City-State-Zip:	NEW YORK NY 10024		

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 CLARK

TREASURER

04/29/2024

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 29, 2024 Secretary of State 3314212532CC

Certificate of Status Desired: No

Date