

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22000006078

Entity Name: I.D.E.A.L. FOR HEALTHCARE INC.

Current Principal Place of Business:

401 E JACKSON ST STE 3300
TAMPA, HILLSBOROUGH, FL 33602

Current Mailing Address:

401 E JACKSON ST STE 3300
TAMPA, HILLSBOROUGH, FL 33602

FEI Number: 88-2866600

Certificate of Status Desired: No

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: UNITED STATES CORPORATION AGENTS, INC.

04/26/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P,D
Name DUELL, KRISTEN
Address 401 E JACKSON ST STE 3300
City-State-Zip: TAMPA, HILLSBOROUGH FL 33602

Title D,S
Name CABBAGE, LORI
Address 401 E JACKSON ST STE 3300
City-State-Zip: TAMPA, HILLSBOROUGH FL 33602

Title D,T
Name HARBOUR, TERESA
Address 401 E JACKSON ST STE 3300
City-State-Zip: TAMPA, HILLSBOROUGH FL 33602

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: DUELL , KRISTEN

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04/26/2023

Electronic Signature of Signing Officer/Director Detail

Date