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

DOCUMENT# N23000008898

Entity Name: LAUDERDALE HEALTH FOUNDATION, INC.

FILED
Jan 21, 2025
Secretary of State
9062760185CC

# **Current Principal Place of Business:**

4000 N. STATE ROAD 7, SUITE 103 LAUDERDALE LAKES. FL 33319

### **Current Mailing Address:**

4000 N. STATE ROAD 7, SUITE 103 LAUDERDALE LAKES, FL 33319 US

FEI Number: 93-2594987 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

NORTHWEST REGISTERED AGENT LLC 7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702 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 PD Title VP

NameOLUMIDE, OLUWOLE DR.NameOPHORI, OGHENEVWOGAGA DR.Address4000 N. STATE ROAD 7, SUITE 103Address4000 N. STATE ROAD 7, SUITE 103City-State-Zip:LAUDERDALE LAKES FL 33319City-State-Zip:LAUDERDALE LAKES FL 33319

Title SD

Name OGUNBADEJO, OLU

Address 4000 N. STATE ROAD 7, SUITE 103 City-State-Zip: LAUDERDALE LAKES FL 33319

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: OLUWOLE OLUMIDE

**PRESIDENT** 

01/21/2025