2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003787

Entity Name: INSTITUTE FOR HEALTH CARE ADVOCACY, INC.

FILED Feb 07, 2019 **Secretary of State** 1209483501CC

Current Principal Place of Business:

1 CIVIC CENTER DR SUITE 310

SAN MARCOS, CA 92069

Current Mailing Address:

1 CIVIC CENTER DRIVE **SUITE 310** SAN MARCOS, CA 92069 US

FEI Number: 59-3198066 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC. 17888 67TH COURT NORTH LOXAHATCHEE, FL 33470 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:

PRESIDENT / DIRECTOR Title Title SECRETARY / DIRECTOR DUNN. LEONARD TROMBLEY, SHERRY Name Name Address 1 CIVIC CENTER DRIVE Address 1 CIVIC CENTER DRIVE **SUITE 310 SUITE 310** City-State-Zip: SAN MARCOS CA 92069 City-State-Zip: SAN MARCOS CA 92069

Title TREASURER / DIRECTOR Title **EXECUTIVE DIRECTOR** ALBRITTON, MILES LINDAHL, WILLIAM Name Name 1 CIVIC CENTER DRIVE 1 CIVIC CENTER DRIVE Address Address **SUITE 310**

SUITE 310

City-State-Zip: SAN MARCOS CA 92069 City-State-Zip: SAN MARCOS CA 92069

Title DIRECTOR Title DIRECTOR DUNN, DEBBIE Name MARCHINI, JOHN D. Name

1 CIVIC CENTER DRIVE 1 CIVIC CENTER DRIVE Address Address

SUITE 310 **SUITE 310**

City-State-Zip: SAN MARCOS CA 92069 City-State-Zip: SAN MARCOS CA 92069

Title **DIRECTOR** Title **DIRECTOR**

Name ALBRITTON, JENNIFER Name ALLRED, MICHAEL

Address 1 CIVIC CENTER DRIVE 1 CIVIC CENTER DRIVE Address SUITE 310

SUITE 310

SAN MARCOS CA 92069 City-State-Zip: SAN MARCOS CA 92069 City-State-Zip:

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.

02/07/2019 SIGNATURE: WILLIAM LINDAHL EXECUTIVE DIRECTOR