

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003787

FILED
Apr 22, 2020
Secretary of State
6183424378CC

Entity Name: INSTITUTE FOR HEALTH CARE ADVOCACY, INC.

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 :

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

Title SECRETARY, TREASURER,
 DIRECTOR
Name ALBRITTON, MILES
Address 1 CIVIC CENTER DRIVE
 SUITE 310
City-State-Zip: SAN MARCOS CA 92069

Title EXECUTIVE DIRECTOR
Name LINDAHL, WILLIAM
Address 1 CIVIC CENTER DRIVE
 SUITE 310
City-State-Zip: SAN MARCOS CA 92069

Title DIRECTOR
Name MARCHINI, JOHN D.
Address 1 CIVIC CENTER DRIVE
 SUITE 310
City-State-Zip: SAN MARCOS CA 92069

Title DIRECTOR
Name DUNN, DEBBIE
Address 1 CIVIC CENTER DRIVE
 SUITE 310
City-State-Zip: SAN MARCOS CA 92069

Title DIRECTOR
Name ALBRITTON, JENNIFER
Address 1 CIVIC CENTER DRIVE
 SUITE 310
City-State-Zip: SAN MARCOS CA 92069

Title DIRECTOR
Name ALLRED, MICHAEL
Address 1 CIVIC CENTER DRIVE
 SUITE 310
City-State-Zip: SAN MARCOS CA 92069

Title DIRECTOR
Name COOK, JENNIFER
Address 1 CIVIC CENTER DR
 SUITE 310
City-State-Zip: SAN MARCOS CA 92069

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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: WILLIAM LINDAHL

EXECUTIVE DIRECTOR

04/22/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WALTER, RENEE
Address 1 CIVIC CENTER DR
SUITE 310
City-State-Zip: SAN MARCOS CA 92069

Title DIRECTOR
Name MCALLISTER, ANGELA
Address 1 CIVIC CENTER DR
SUITE 310
City-State-Zip: SAN MARCOS CA 92069