

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000036676

Entity Name: INTEGRATED HEALTHCARE SYSTEMS BEHAVIORAL HEALTH
INC

Current Principal Place of Business:

31 W 20TH STREET
RIVIERA BEACH, FL 33404

Current Mailing Address:

31 W 20TH STREET
RIVIERA BEACH, FL 33404 US

FEI Number: 87-3475661

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, MONIQUE
31 W 20TH STREET
WEST PALM BEACH, FL 33404 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	DIRECTOR	Title	DIRECTOR
Name	GILMORE, DESMOND	Name	BROWN, MONIQUE
Address	31 W 20TH ST STE 300	Address	31 W 20TH ST STE 300
City-State-Zip:	RIVIERA BEACH FL 33404	City-State-Zip:	RIVIERA BEACH FL 33404

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MONIQUE BROWN FAUST

DIRECTOR

04/28/2024

Electronic Signature of Signing Officer/Director Detail

Date