

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000002333

Entity Name: THE FOOD ADDICTION INSTITUTE, INC.**Current Principal Place of Business:**7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702**Current Mailing Address:**7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702 US**FEI Number:** 61-1203757**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:** TAYLOR NEWMAN

03/07/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name OBIAD, MONA
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name BRANSCOME, SUSAN
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name CHEREN, MARK
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name GORMLEY, KAREN
Address 96 JERICO RD
City-State-Zip: GRANTHAM NH 03753

Title DIRECTOR
Name WOLFE, DAVID AVRAM
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name WOLFE, JUDY
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name WRIGHT, THERESA
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name FRITZ-FLEINER-WEG, DARIA
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

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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: CYNTHIA MYERS-MORRISON**PRESIDENT**

03/07/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BROWN, SUE
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name ABOABA, OLUBUNMI
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title SECRETARY
Name ANANST, MARY
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name NOLAN, BONNIE
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title PRESIDENT
Name MYERS-MORRISON, CYNTHIA
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title TREASURER
Name AJOUNI, SACHIR
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702