

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000011594

**FILED**  
**Feb 23, 2015**  
**Secretary of State**  
**CC1471780586**

**Entity Name:** INSTITUTE OF LAW AND POLICY PLANNING, INC.

**Current Principal Place of Business:**

2613 HILLEGASS AVE.  
BERKELEY, CA 94704

**Current Mailing Address:**

2613 HILLEGASS AVE.  
BERKELEY, CA 94704

**FEI Number:** 94-2598722

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PARRISH, JIM  
3041 CARLOW CIRCLE  
TALLAHASSEE, FL 32308 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 P  
Name KALMANOFF, ALAN  
Address 2613 HILLEGASS AVE.  
City-State-Zip: BERKELEY CA 94704

Title T  
Name GUYDEN, LINDA  
Address 629 CUMBERLAND AVE.  
City-State-Zip: TEANECK NJ 07666

Title S  
Name BERGUM, SHELLEY  
Address 1939 PARKER ST.  
City-State-Zip: BERKELEY CA 94704

*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:** ALAN KALMANOFF

**EXECUTIVE DIRECTOR**

**02/23/2015**

Electronic Signature of Signing Officer/Director Detail

Date