

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000003054

Entity Name: INTERNATIONAL RECOVERY MANAGEMENT, INC.

Current Principal Place of Business:

1050 HILLSBORO MILE #808W
HILLSBORO BCH, FL 33062

Current Mailing Address:

13639 ALLAMANDA CIRCLE
PORT CHARLOTTEE, FL 33981 US

FEI Number: 45-4834562

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NACHTWEY, KIMBERLY D
13639 ALLAMANDA CIRCLE
PORT CHARLOTTE, FL 33981 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 D
Name BENZIO, KARL
Address 108 RIDGE VIEW LANE
City-State-Zip: DOYLESTOWN PA 18901

Title PD
Name HOSKINS, DAVID
Address 1050 HILLSBORO MILE #808W
City-State-Zip: HILLSBORO BCH FL 33062

Title STD
Name NACHTWEY, KIMBERLY D
Address 13639 ALLAMANDA CIR
City-State-Zip: PORT CHARLOTTE FL 33981

Title DIRETOR
Name THOMSON, ANGELA K
Address PO BOX 668
City-State-Zip: DEERFIELD BEACH FL 33443

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: KIMBERLY D. NACHTWEY

OPERATIONS DIRECTOR 03/23/2017

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date