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FILED

Feb 06 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 715012 (1)

1. Corporation Name

THE CREATIVE LIFE CENTER FOR POSITIVE LIVING, IN
C.

Principal Place of Business

Mailing Address

2821 SKYVIEW DRIVE
LAKELAND FL 338012821 SKYVIEW DRIVE
LAKELAND FL 33801-70773. Date Incorporated or Qualified
07/25/19683a. Date of Last Report
05/01/1996

4. FEI Number

59-1714179

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida StatutesYes ☐ No

2. Principal Place of Business

2b. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 25 29 30 9. Name and Address of Current Registered Agent

FISHER, HELEN
1511 SPRUCE DR
LAKELAND FL 33801

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE S ☐ DELETENAME TANNER, LOUISE
STREET ADDRESS P.O. BOX 1790 N/A
CITY-ST-ZIP WINTER HAVEN FL 33880TITLE PD ☐ DELETENAME HAMBRICK, TROY
STREET ADDRESS 1012 LAKE LURE LOOP E.
CITY-ST-ZIP LAKELAND FL 33308-1TITLE T ☐ DELETENAME HAMBRICK, DENE'
STREET ADDRESS 1012 LAKE LORE LOOP E
CITY-ST-ZIP LAKELAND FL 33801TITLE C ☐ DELETENAME DOUGLAS, NINA
STREET ADDRESS 1670 SEVENTEETH AVE
CITY-ST-ZIP WINTER HAVEN FL 33880TITLE D ☒ DELETENAME WYRICK, LISA
STREET ADDRESS 2231 HONEY COMB LANE
CITY-ST-ZIP LAKELAND FL 33801TITLE D ☐ DELETENAME FISHER, HELEN
STREET ADDRESS 1511 SPRUCE DR.
CITY-ST-ZIP LAKELAND FL 33801

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition1.2 NAME Fisher, Harry
1.3 STREET ADDRESS 1511 Spruce Dr.
1.4 CITY-ST-ZIP Lakeland, FL 338612.1 TITLE D ☐ Change ☒ Addition2.2 NAME Baker, Gary
2.3 STREET ADDRESS 1550 11th Street NE, Apt. G-1
2.4 CITY-ST-ZIP Winter Haven, FL 338813.1 TITLE D ☐ Change ☒ Addition3.2 NAME Clark, Loretta
3.3 STREET ADDRESS 1836 W. Crystal Lake Dr. #40
3.4 CITY-ST-ZIP Lakeland, FL 338014.1 TITLE D ☐ Change ☒ Addition4.2 NAME Hummer, Trish
4.3 STREET ADDRESS 4444 US 98 N. / Box 697
4.4 CITY-ST-ZIP Lakeland, FL 338095.1 TITLE D ☐ Change ☒ Addition5.2 NAME CAREY, Barbara
5.3 STREET ADDRESS 1125 Stonebrooke Ln.
5.4 CITY-ST-ZIP Lakeland, FL 338036.1 TITLE D ☐ Change ☒ Addition6.2 NAME Levesque, Margo
6.3 STREET ADDRESS 3815 Garnet Dr.
6.4 CITY-ST-ZIP Mulberry, FL 33860

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dene' Elizabeth Hambrick - Dene' Elizabeth Hambrick - Treasurer - 1-30-97 - 465-2301
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0052473

CR2E037 (9/96)