2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2004
Secretary of State

DOCUMENT# N09535

Entity Name: FOUNDATION FOR INDEPENDENT LIVING, INC.

Current Principal Place of Business:

1383 LYONS RD
COCONUT CREEK, FL 33063

New Principal Place of Business:

Current Mailing Address:

1383 LYONS RD
COCONUT CREEK, FL 33063 US

New Mailing Address:

FEI Number: 59-2656932 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BEDERMAN, STUART
3100 NE 47TH CT #304
FT. LAUDERDALE, FL 33308

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: MISHNER, SCOTT,
Address: 21741 CLUB VILLA T.
City-St-Zip: BOCA RATON, FL 33433

Title: PD ( ) Delete
Name: BEDERMAN, STUART
Address: 3100 NE 47TH CT. #304
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: TD ( ) Delete
Name: LECK, P. JEFF
Address: 18133 LONG WATER RUN DRIVE
City-St-Zip: TAMPA, FL 33467

Title: S ( ) Delete
Name: MASTINGER, MARIA
Address: 7455 SW 82ND COURT
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change ( ) Addition
Name: MISHNER, SCOTT
Address: 21741 CLUB VILLA T.
City-St-Zip: BOCA RATON, FL 33433

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SCOTT MISHNER CD 01/29/2004

Electronic Signature of Signing Officer or Director — Date