

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000007401

**Entity Name:** INDEPENDENCE WORKS, INC.

**Current Principal Place of Business:**

2393 SOUTH CONGRESS AVE  
SUITE 200  
WEST PALM BEACH, FL 33406

**Current Mailing Address:**

2393 SOUTH CONGRESS AVE  
SUITE 200  
WEST PALM BEACH, FL 33406 US

**FEI Number:** 20-3383117

**Certificate of Status Desired:** No

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

ABEL, SUSAN  
2393 SOUTH CONGRESS AVE  
SUITE 200  
WEST PALM BEACH, FL 33406 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:** SUSAN ABEL

03/17/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name LEDDY, JOSEPH CSR.  
Address 2880 NE 14TH STREET, #901  
City-State-Zip: POMPANO BEACH FL 33062

Title D  
Name CERRA, GLORIA JEAN  
Address 2880 NE 14TH STREET CSWY  
City-State-Zip: POMPANO BEACH FL 33062

Title D  
Name GARRICK, SEAN  
Address 115 NW 2ND AVE  
City-State-Zip: SOUTH BAY FL 33493

Title T  
Name WOOD, STEPHEN A  
Address 114 LOCUST ST  
City-State-Zip: DOVER NH 03820

Title DIRECTOR  
Name MALONEY, JOHNNY  
Address 5630 WEST ATLANTIC AVE  
APT 107  
City-State-Zip: DELRAY BEACH FL 33484

*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:** STEPHEN A. WOOD

TREASURER

03/17/2014

Electronic Signature of Signing Officer/Director Detail

Date