

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09535

Entity Name: FOUNDATION FOR INDEPENDENT LIVING, INC.**Current Principal Place of Business:**1367 LYONS RD
COCONUT CREEK, FL 33063**Current Mailing Address:**1367 LYONS RD
COCONUT CREEK, FL 33063**FEI Number:** 59-2656932**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ENGELMAN, JODI
10989 NW 81ST MANOR
PARKLAND, FL 33076 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:** JODI ENGELMAN

02/06/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIRMAN
Name	BEDERMAN, STEVEN M
Address	22452 E PEAKVIEW DRIVE
City-State-Zip:	AURORA CO 80016
Title	DIRECTOR
Name	WIZNITZER, LEO
Address	9350 W BAY HARBOR DRIVE #7B
City-State-Zip:	BAY HARBOR ISLANDS FL 33154
Title	SECRETARY
Name	SIMON, DANNY
Address	3276 GRANVILLE AVENUE
City-State-Zip:	LOS ANGELES CA 90066
Title	EXECUTIVE DIRECTOR
Name	JACOBY, MARK A
Address	6027 SUNBERRY CIRCLE
City-State-Zip:	BOYNTON BEACH FL 33437

Title	DIRECTOR
Name	LECK, P. JEFF
Address	16824 FLYING JIB ROAD
City-State-Zip:	CORNELIUS NC 28031
Title	PRESIDENT
Name	MISHNER, CHARLES
Address	5257 SUFFOLK DRIVE
City-State-Zip:	BOCA RATON FL 33496
Title	DIRECTOR
Name	BEDERMAN, TIFFANIE
Address	31981 VIRGINIA WAY
City-State-Zip:	LAGUNA BEACH CA 92651
Title	TREASURER
Name	KOCH, LARRY
Address	1105 LITTLE HARBOR DRIVE
City-State-Zip:	DEERFIELD BEACH FL 33441

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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: MARK JACOBY**EXECUTIVE DIRECTOR**

02/06/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name THOMPSON, ROY
Address 2102 WINDSOR STREET
City-State-Zip: MURFREESBORO TN 37130

Title DIRECTOR
Name COREY, CLINT
Address 17607 VALENCIAL BLVD.
City-State-Zip: LOXAHATCHEE FL 33470