

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000004679

**Entity Name:** HOMES FOR INDEPENDENCE, INC.

**Current Principal Place of Business:**

2735 WHITNEY ROAD  
CLEARWATER, FL 33760

**Current Mailing Address:**

2735 WHITNEY ROAD  
CLEARWATER, FL 33760 US

**FEI Number:** 59-3342379

**Certificate of Status Desired:** Yes

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

THOMAS, GENE  
2735 WHITNEY ROAD  
CLEARWATER, FL 33760 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 DIRECTOR  
Name GILBERT, DWIGHT  
Address 1799 HIGHLAND AVE. #H-119  
City-State-Zip: CLEARWATER FL 33755

Title PRESIDENT  
Name CICOLELLI, LISA  
Address 2735 WHITNEY ROAD  
City-State-Zip: CLEARWATER FL 33760

Title VC  
Name MACKSAM, SCOTT  
Address 2805 87TH PLACE 205  
City-State-Zip: PINELLAS PARK FL 33782

Title CHAIRMAN  
Name SUMNER, ROB  
Address 601 64TH ST. N.  
City-State-Zip: ST PETERSBURG FL 33710

Title SECRETARY  
Name MCSHERRY, BARBARA  
Address 2500 HARN BLVD #E-03  
City-State-Zip: CLEARWATER FL 33764

Title TREASURER  
Name SOUTHSCOTT, KEVIN  
Address 4215 EAST BAY DRIVE  
City-State-Zip: CLEARWATER FL 33764

*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:** LISA CICOLELLI

**PRESIDENT**

**01/18/2018**

Electronic Signature of Signing Officer/Director Detail

Date