

2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001410

Entity Name: CENTER FOR INDIVIDUAL FREEDOM, INC.

Current Principal Place of Business:

815 KING STREET, SUITE 303
ALEXANDRIA, VA 22314

Current Mailing Address:

4850 WRIGHT RD.
168
STAFFORD, TX 77477

FEI Number: 54-1916980

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 PD
Name MAZZELLA, JEFFREY L
Address 815 KING STREET, SUITE 303
City-State-Zip: ALEXANDRIA VA 22314

Title CD
Name FABRIZIO, ANTHONY M
Address 815 KING STREET, SUITE 303
City-State-Zip: ALEXANDRIA VA 22314

Title STBD
Name GIACHINO, RENEE
Address 815 KING STREET, SUITE 303
City-State-Zip: ALEXANDRIA VA 22314

Title D
Name HERSCHENSOHN, BRUCE
Address 815 KING STREET, SUITE 303
City-State-Zip: ALEXANDRIA VA 22314

Title DIRECTOR
Name CRAIG, CHRISTOPHER T
Address 815 KING STREET, SUITE 303
City-State-Zip: ALEXANDRIA VA 22314

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: JEFFREY L. MAZZELLA

PRESIDENT/DIRECTOR

02/23/2017

Electronic Signature of Signing Officer/Director Detail

Date