

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761764

FILED
Jan 05, 2011
Secretary of State

Entity Name: CENTER FOR INDEPENDENT LIVING OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

3600 N PACE BOULEVARD
PENSACOLA, FL 32505 US

New Principal Place of Business:

Current Mailing Address:

3600 N PACE BOULEVARD
PENSACOLA, FL 32505 US

New Mailing Address:

FEI Number: 59-2288751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHERRY, FRANK G E.D.
3600 N. PACE BLVD
PENSACOLA, FL 32505 US

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: PD
Name: HORAK, DEBBIE
Address: 4029 SHOREWOOD DRIVE
City-St-Zip: PENSACOLA, FL 32507

Title: PED
Name: NUNAMAKER, ARTHUR
Address: 1811 AMOS CIRCLE
City-St-Zip: PENSACOLA, FL 32526

Title: S
Name: WILKS, KATHY
Address: 7255 CHESTNUT ROAD
City-St-Zip: MOLINO, FL 32577

Title: TD
Name: BOUCHARD, JOHN
Address: 30 E TEXAR DRIVE
City-St-Zip: PENSACOLA, FL 32503

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: DEBBIE HORAK

PD

01/05/2011

Electronic Signature of Signing Officer or Director

Date