

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767970

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** CENTER FOR POSITIVE LIVING, INC.

**Current Principal Place of Business:**

677 N. WASHINGTON BLVD.  
#46  
SARASOTA, FL 34236 US

**New Principal Place of Business:**

**Current Mailing Address:**

677 N. WASHINGTON BLVD.  
#46  
SARASOTA, FL 34236 US

**New Mailing Address:**

**FEI Number:** 94-2778677

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RITZ, DAVID O  
677 N. WASHINGTON BLVD  
#46  
SARASOTA, FL 34236 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: PRES  
Name: OWEN RITZ, DAVID  
Address: 677 N WASHINGTON BLVD  
City-St-Zip: SARASOTA, FL 34236

Title: BM  
Name: FOSTER, GILBERT  
Address: 4617 FORREST WOOD TRAIL  
City-St-Zip: SARASOTA, FL 34241

Title: BM  
Name: LARSEN, LINDA  
Address: 3424 TANGLEWOOD DRIVE  
City-St-Zip: SARASOTA, FL 34239

Title: BM  
Name: BABENCO, SUSAN  
Address: 2633 PORMA STREET  
City-St-Zip: SARASOTA, FL 34237

Title: BM  
Name: VACANT  
Address: 677 N WASHINGTON BLVD  
City-St-Zip: SARASOTA, FL 34236

Title: BM  
Name: VACANT  
Address: 677 N WASHINGTON BLVD  
City-St-Zip: SARASOTA, FL 34236

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: DAVID OWEN RITZ

DIR

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date