

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

01-25-2007 90641 002 ****70.00
N01000005329

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01000005329 1. Entity Name INDEPENDENT LIVING FOUNDATION, INC.					
Principal Place of Business 2121 CORPORATE SQUARE BLVD. SUITE 240B JACKSONVILLE, FL 32216			Mailing Address 2121 CORPORATE SQUARE BLVD. SUITE 240B JACKSONVILLE, FL 32216		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3721949	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent MEYER, BETH 2121 CORPORATE SQUARE BLVD. SUITE 240B JACKSONVILLE, FL 32216			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Beth Meyer</u> 1-23-2007 Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reappointing) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES WESTMORELAND, WEST MR. 2121 CORPORATE SQUARE BLVD. # 240B JACKSONVILLE, FL 32216 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WYNN, J.W. MR. 2121 CORPORATE SQUARE BLVD. @ 240B JACKSONVILLE, FL 32216 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member Asbury, Tom, Mr. 2121 Corporate Square Blvd # 240B Jacksonville FL 32216 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DAVIS, KEN MR. 2121 CORPORATE SQUARE BLVD. # 240B JACKSONVILLE, FL 32216 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA GIFFORD, MARY MS 2121 CORPORATE SQUARE BLVD. # 240 B JACKSONVILLE, FL 32207 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA Hill, Panda, Mrs. 2121 Corporate Square Blvd # 240B Jacksonville, FL 32216 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC BERTWELL, PAM MS. 2121 CORPORATE SQUARE BLVD. # 240 B JACKSONVILLE, FL 32216 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	B3/28/07 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMBER-VP CARTER, STAN MR 2121 CORPORATE SQUARE BLVD. # 240 B. JACKSONVILLE, FL 32216 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Carter, Stan, Mr 2121 Corporate Square Blvd # 240B Jacksonville FL 32216 ☒ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Sh Westmoreland</u> 1-23-2007 904-725-0621 SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR Date Daytime Phone #					