

2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000005329

FILED
Apr 08, 2013
Secretary of State

Entity Name: INDEPENDENT LIVING FOUNDATION, INC.

Current Principal Place of Business:

2709 ART MUSEUM DRIVE
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

2709 ART MUSEUM DRIVE
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-3721949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MEYER, BETH
2709 ART MUSEUM DRIVE
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

WILLIAMS, PAMELA P
2709 ART MUSEUM DRIVE
JACKSONVILLE, FL 32207 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: PAMELA P WILLIAMS

04/08/2013

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: MOTKO, MATTHEW MR.
Address: 2709 ART MUSEUM DR
City-St-Zip: JACKSONVILLE, FL 32207

Title: TREA
Name: WILLIAMS, PAMELA
Address: 2709 ART MUSEUM DR
City-St-Zip: JACKSONVILLE, FL 32207

Title: REP
Name: MORRIS, TYLER
Address: 2709 ART MUSEUM DRIVE
City-St-Zip: JACKSONVILLE, FL 32207

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: PAMELA P WILLIAMS

TREA

04/08/2013

Electronic Signature of Signing Officer or Director

Date