

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006572

FILED
Apr 22, 2004
Secretary of State**Entity Name:** THE CENTRE FOR POSITIVE LIVING, INC.**Current Principal Place of Business:**204 SOUTH ORANGE STREET
SEBRING, FL 33870 US**New Principal Place of Business:****Current Mailing Address:**204 SOUTH ORANGE STREET
SEBRING, FL 33870 US**New Mailing Address:****FEI Number:** 65-1159199**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MCCLURE, JOHN K
230 SOUTH COMMERCE AVENUE
SEBRING, FL 338703735 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: D () Delete
Name: CONYER, ANDREW
Address: 4627 LAYFAYETTE AVENUE
City-St-Zip: SEBRING, FL 33875

Title: D () Delete
Name: BAIRD, J.D.
Address: 124 NE LAKEVIEW DRVE #6
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: CUMMINGS, SHERRILL
Address: 6232 SUNRISE WAY
City-St-Zip: SEBRING, FL 33875

Title: D () Delete
Name: LOVELETTE, TERI
Address: 38 HIDDEN HARBOR LANE
City-St-Zip: LAKE PLACID, FL 33852

Title: D () Delete
Name: PADGETT, BEVERLY
Address: 3811 BARBAROSSA AVENUE
City-St-Zip: SEBRING, FL 33872

Title: D () Delete
Name: HAVLOCK, MILLIE
Address: 5535 U.S. HIGHWAY 27 SOUTH
City-St-Zip: SEBRING, FL 33870

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CONYER, ANDREW
Address: 204 S ORANGE STREET
City-St-Zip: SEBRING, FL 33875

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WOLKOVE, BERNARD
Address: 204 S ORANGE STREET
City-St-Zip: SEBRING, FL 33870

Title: T (X) Change () Addition
Name: DECERBO, JOE
Address: 204 S ORANGE STREET
City-St-Zip: SEBRING, FL 33870

Title: S (X) Change () Addition
Name: PADGETT, BEVERLY
Address: 204 S ORANGE STREET
City-St-Zip: SEBRING, FL 33870

Title: VP (X) Change () Addition
Name: HAVLOCK, MILLIE
Address: 204 S ORANGE STREET
City-St-Zip: SEBRING, FL 33870

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANDREW CONYER

P

04/22/2004

Electronic Signature of Signing Officer or Director

Date