## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000007312

FILED Jan 18, 2012 Secretary of State

Entity Name: NEW VISION FOR INDEPENDENCE, INC.

Current Principal Place of Business: New Principal Place of Business:

LAKE-SUMTER COMMUNITY COLLEGE 9501 US HWY 441

LEESBURG, FL 34788 US

Current Mailing Address: New Mailing Address:

LAKE-SUMTER COMMUNITY COLLEGE 9501 US HWY 441 LEESBURG, FL 34788 US

FEI Number: 20-3288751 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KOLLMANN, COLLEEN A 26918 WHITE PLAINS WAY LEESBURG, FL 32748 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: PRES

 Name:
 CHAPMAN, DEANNA

 Address:
 2761 WEST OLD HWY 441

 City-St-Zip:
 MOUNT DORA, FL 32757 US

Title: TREA

Name: BLAIR, PATRICIA

Address: 2708 GRAND ISLAND SHORES ROAD

City-St-Zip: EUSTIS, FL 32726 US

Title: SEC

Name: HARTKOP, NANCY
Address: 7031 FLETCHER RD
City-St-Zip: UMATILLA, FL 32784 US

Title: VP

 Name:
 MCFADDEN, LINDA

 Address:
 360 W RUBY ST

 City-St-Zip:
 TAVARES, FL 32778 US

Title: DIR
Name: MARX, DON
Address: 4072 UNITED AVE

City-St-Zip: MOUNT DORA, FL 32757 US

Title: DIR

Name: KOLLMANN, COLLEEN
Address: 26918 WHITE PLAINS WAY
City-St-Zip: LEESBURG, FL 34748 US

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: COLLEEN KOLLMANN DIR 01/18/2012