

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000009914

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** FOUNDATION FOR REDEEMED LIVING, INC.

**Current Principal Place of Business:**

12121 CLEAR HARBOR DRIVE  
TAMPA, FL 33626

**New Principal Place of Business:**

**Current Mailing Address:**

12121 CLEAR HARBOR DRIVE  
TAMPA, FL 33626

**New Mailing Address:**

**FEI Number:** 26-1239785

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBERTS, KYLE J  
12121 CLEAR HARBOR DRIVE  
TAMPA, FL 33626 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  
Name: ROBERTS, KYLE J  
Address: 12121 CLEAR HARBOR DRIVE  
City-St-Zip: TAMPA, FL 33626

Title: D  
Name: PLIMPTON, BEVERLY  
Address: 15215 AMBERLY DRIVE #1011  
City-St-Zip: TAMPA, FL 33647

Title: D  
Name: ROBERTS, WILLIAM R  
Address: 12121 CLEAR HARBOR DRIVE  
City-St-Zip: TAMPA, FL 33626

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: WILLIAM R ROBERTS

D

01/04/2011

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

\_\_\_\_\_  
Date