

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000009914

FILED  
Feb 15, 2012  
Secretary of State

**Entity Name:** COLLABORATIVE DIVORCE INSTITUTE OF TAMPA BAY, INC.

**Current Principal Place of Business:**

1003 WEST CLEVELAND STREET  
TAMP, FL 33606

**New Principal Place of Business:**

1003 WEST CLEVELAND STREET  
TAMPA, FL 33606

**Current Mailing Address:**

1003 WEST CLEVELAND STREET  
TAMP, FL 33606

**New Mailing Address:**

1003 WEST CLEVELAND STREET  
TAMPA, FL 33606

**FEI Number:** 45-3667184

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REINEKE, BETH  
1003 WEST CLEVELAND STREET  
TAMP, FL 33606 US

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

REINEKE, BETH  
1003 WEST CLEVELAND STREET  
TAMPA, FL 33606 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:

02/15/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: REINEKE, BETH  
Address: 1003 WEST CLEVELAND STREET  
City-St-Zip: TAMPA, FL 33606

Title: DV  
Name: MILLER, KIMBERLY  
Address: 1003 WEST CLEVELAND STREET  
City-St-Zip: TAMPA, FL 33606

Title: DT  
Name: TOTH, KATHLEEN  
Address: 1003 WEST CLEVELAND STREET  
City-St-Zip: TAMPA, FL 33606

Title: DS  
Name: HOLLIDAY, JEANNIE  
Address: 1003 WEST CLEVELAND STREET  
City-St-Zip: TAMPA, FL 33606

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: KATHLEEN TOTH

DT

02/15/2012

Electronic Signature of Signing Officer or Director

Date