

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31624

FILED
Apr 14, 2009
Secretary of State

Entity Name: CENTER FOR THE STUDY OF INDEPENDENT LIVING, INCORPORATED

Current Principal Place of Business:

11428 SW 109TH RD
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

11428 SW 109TH RD
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0128739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORMAN, DAVID
11428 SW 109TH RD
MIAMI, FL 33176 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: DP () Delete
Name: FORMAN, LAWRENCE
Address: 11428 SW 109TH RD
City-St-Zip: MIAMI, FL 33176

Title: DVS () Delete
Name: CARRUTHERS, DARLENE
Address: 11428 SW 109TH RD
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: EVANS, PATRICIA D.
Address: 11428 SW 109TH RD
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LAWRENCE FORMAN

DP

04/14/2009

Electronic Signature of Signing Officer or Director

Date