2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2012
Secretary of State

DOCUMENT# N36147

Entity Name: COALITION FOR INDEPENDENT LIVING OPTIONS, INC.

Current Principal Place of Business:

6800 FOREST HILL BLVD
WEST PALM BEACH, FL 33413 US

New Principal Place of Business:

Current Mailing Address:

6800 FOREST HILL BLVD
WEST PALM BEACH, FL 33413 US

New Mailing Address:

FEI Number: 65-0174695 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FIELDS, JOSEPH R ESQ
5200 HOOD RD
STE 200
PALM BEACH GARDENS, FL 33418 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: PD
Name: GAITAN, MARIA
Address: 8501 ELAINE DR
City-St-Zip: BOYNTON BEACH, FL 33472

Title: SD
Name: FIELDS, JOSEPH R ESQ.
Address: 5200 HOOD RD STE 200
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VPD
Name: BALLANCE, PETER
Address: 4206 CAESAR CIRCLE
City-St-Zip: GREENACRES, FL 33463

Title: TD
Name: CHAPMAN, KRISTI
Address: 2222 E CAROL CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33415

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: MARIA GAITAN PD 01/12/2012

Electronic Signature of Signing Officer or Director Date