

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43974

FILED
Mar 23, 2009
Secretary of State

Entity Name: CENTER FOR INDEPENDENT LIVING OF BROWARD, INC.

Current Principal Place of Business:

4800 N. STATE ROAD 7
SUITE 102
FORT LAUDERDALE, FL 333195811

New Principal Place of Business:

Current Mailing Address:

4800 N. STATE ROAD 7
SUITE 102
FORT LAUDERDALE, FL 333195811

New Mailing Address:

FEI Number: 65-0292125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KICKLIGHTER, LEILANI
5102 LAUREL CIRCLE
TAMARAC, FL 33319 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 () Delete
Name: KENNEDY, PATRICIA
Address: 4205 NW 80TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33321

Title: P () Delete
Name: CASTELLANOS, DANIEL
Address: 9300 SW 2ND ST.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Delete
Name: WOLFE, DENISE
Address: 871 SE 7TH AVE
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: HOUGHTON, ANDREW
Address: 1140 LIDFLOWER ST
City-St-Zip: HOLLYWOOD, FL 33019

Title: D () Delete
Name: MIDEI, RON
Address: 14660 MADISON PL
City-St-Zip: DAVIE, FL 33325

Title: D () Delete
Name: ANDERSON, JAMES
Address: 3941 NW 30TH TERRACE, #3
City-St-Zip: LAUDERDALE LAKES, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: KICKLIGHTER, LELANI
Address: 5102 LAUREL CIRCLE
City-St-Zip: TAMARAC, FL 33319

Title: D (X) Change () Addition
Name: CASTELLANOS, DANIEL
Address: 9300 SW 2ND ST.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VP (X) Change () Addition
Name: HOUGHTON, JILL
Address: 1140 LIDFLOWER ST
City-St-Zip: HOLLYWOOD, FL 33019

Title: P (X) Change () Addition
Name: HOUGHTON, ANDREW
Address: 1140 LIDFLOWER ST
City-St-Zip: HOLLYWOOD, FL 33019

Title: T (X) Change () Addition
Name: MIDEI, RON
Address: 14660 MADISON PL
City-St-Zip: DAVIE, FL 33325

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: LEONARD KURTZ

MR.

03/23/2009

Electronic Signature of Signing Officer or Director

Date