

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48058

FILED
Jan 15, 2010
Secretary of State

Entity Name: CENTER FOR INDEPENDENT LIVING OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

2321 BRUNER LANE
FT. MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

2321 BRUNER LANE
FT. MYERS, FL 33912

New Mailing Address:

FEI Number: 65-0345103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRIUIST, ROBERT E
2321 BRUNER LANE
FT. MYERS, FL 33912 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
Name: ROWLAND, CATHY
Address: 2321 BRUNER LANE
City-St-Zip: FORT MYERS, FL 33912

Title: DS
Name: TURNER, LYN
Address: 2321 BRUNER LANE
City-St-Zip: FORT MYERS, FL 33912

Title: DVP
Name: BERRY, KEVIN
Address: 2321 BRUNER LANE
City-St-Zip: FORT MYERS, FL 33912

Title: DT
Name: MORRIS, JUDITH
Address: 2321 BRUNER LANE
City-St-Zip: FORT MYERS, FL 33912

Title: D
Name: MUDD, GROVER
Address: 2321 BRUNER LANE
City-St-Zip: FORT MYERS, FL 33912

Title: D
Name: MUSCHONG, RONALD
Address: 2321 BRUNER LANE
City-St-Zip: FORT MYERS, FL 33912

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: ROBERT EUGENE BRIUIST

ED

01/15/2010

Electronic Signature of Signing Officer or Director

Date