2001 UNIFORM BUSINESS REPORT (UBR)

Feb 08, 2001 8:00 am **DOCUMENT # N50367 Secretary of State** 1. Entity Name CENTER FOR INDEPENDENT LIVING OF SOUTH FLORIDA. 02-08-2001 90151 011 ****70 00 Principal Place of Business Mailing Address 501 NE FIRST AVE 501 NE FIRST AVE STE 102 STE 102 **MIAMI FL 33132** MIAMI FL 33132 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0379532 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ----Street Address (P.O. Box Number is Not Acceptable) LANHAM, MICHAEL F. 501 NE FIRST AVE SUITE 102 City Zip Code **MIAMI FL 33132** 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees **Department of State** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE TITLE ☐ Change ☐ Addition Delete ROBERTS, ALVIN WN NAME NAME STREET ADDRESS STREET ADDRESS 1201 NW 16 STREET CITY-ST-ZIF CITY-ST-ZIP **MIAMI FL 33125** DV ☐ Addition TITLE ☐ Delete TITLE Change BRIDIS, TED NAME NAME STREET ADDRESS STREET ADDRESS 9785 SW 145TH ST CITY-ST-ZIP MIAMI FL CITY-ST-ZIP Delete ☐ Change ☐ Addition WATSON, DARLENE NAME NAME STREET ADDRESS 7301 LOCH ISLE DR SOUTH STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI LAKES FL 33014 TITLE Addition TITLE ☐ Delete Change NAME MOSS, MICHAEL NAME STREET ADDRESS 8601 NW 193RD TER STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33015** Delete TITLE Change ☐ Addition TITLE BELTON, SANDY NAME NAME STREET ADDRESS STREET ADDRESS 1485 NE 152 ST CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33162** TITLE Delete TITL F ☐ Change ☐ Addition SANTOS, BRUNO NAME NAME STREET ADDRESS STREET ADDRESS 21361 NE 8 AVENUE, APT 1 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33179** 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, Turther certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under outh: that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by the pter 617, Florida Statutes and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Roberts 1/23/01 305-379-6650

Davtime Phone #

SOUTH FLORIDA ASSOCIATION FOR DISABILITY ADVOCACY, INC.

d/b/a CENTER FOR INDEPENDENT LIVING OF SOUTH FLORIDA

OFFICERS AND DIRECTORS

DP

Alvin Wm. Roberts 1201 NW 16 Street Miami, Florida 33125

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Ted Bridis 9785 SW 145 St. Miami, FL 33176

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Darlene Watson 7301 Loch Isle Drive, South Miami Lakes, FL 33014

DS

Sandy Belton 1485 NE 152 Street North Miami Beach, FL 33162

D

Harold Eshbach 11240 SW 145 Avenue Miami, FL 33186

D

Bruno Santos 21361 NE 8 Avenue, #1 North Miami Beach, FL 33179

D

Michael Moss 8601 NW 193 Terrace Miami, FL 33015

D

Barbara Gratzke
2660 SE 7 Place
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Michael Nealey 225 Upper Matecumbe Road Key Largo, FL 33037

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Gail Martell 76080 Overseas Highway #11 Islamorada, FL 33036 812840

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