2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50367

FILED Jan 31, 2008 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

6660 BISCAYNE BLVD 6660 BISCAYNE BLVD 1ST FLOOR MIAMI, FL 33138

MIAMI, FL 33138

Current Mailing Address: New Mailing Address:

6660 BISCAYNE BLVD 6660 BISCAYNE BLVD 1ST FLOOR MIAMI, FL 33138 MIAMI, FL 33138

FEI Number: 65-0379532 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GREENE, KELLY 12 NW 116 STREET MIAMI, FL 33168

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

MAIMI, FL 33176 US

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

MIAMI, FL 33131 US

DP (X) Change () Addition () Delete ROBERTS, ALVIN WM ROBERTS, ALVIN W Name: Name:

1201 NW 16 STREET Address: 1201 NW 16 STREET Address: City-St-Zip: MIAMI, FL 33125 US City-St-Zip: MIAMI, FL 33125 US

Title: DV () Delete Title: (X) Change () Addition MOSS, BARBARA Name: MOSS, BARBARA Name:

Address: 3090 S W 140TH AVE Address: 3090 S W 140TH AVE City-St-Zip: MIAMI, FL 33027 US City-St-Zip: MIRAMAR, FL 33027 US

Title: () Delete Title: DS (X) Change () Addition GOLDFARB, GREGG JD

BAER, ROCHELLE Name: Name: 19 WEST FLAGER STREET, SUTE 703 Address: Address: 1514 SAN IGNACIO City-St-Zip: MIAMI, FL 33130 US City-St-Zip: MIAMI, FL 33146 US

Title: DT () Delete Title: DT (X) Change () Addition

BAER, ROCHELLE A MSW Name: Name: ALFANO, JOSEPH 1581 BRICKELL AVENUE, APT 2107 720 CORAL WAY Address: Address: City-St-Zip: MIAMI, FL 33129 US City-St-Zip: MIAMI, FL 33134 US

Title: () Delete Title: (X) Change () Addition

GRATZKE, BARBARA BA GRATZKE, BARBARA Name: Name: 2680 SE 7 PLACE 2660 SE 7 PLACE Address: Address:

HOMESTEAD, FL 33033 US City-St-Zip: HOMESTEAD, FL 33033 US City-St-Zip:

Title: () Delete Title: (X) Change () Addition LESSNE, ROBERT PHD GOLDFARB, GREGG J.D. Name: Name: Address: 10765 SW 104 STREET Address: 1111 BRICKELL AVENUE

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.

City-St-Zip:

SIGNATURE: KELLY GREENE **EXEC** 01/31/2008