2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empowered.

Mar 15, 2004 8:00 am DOCUMENT # N93000003964 **Secretary of State** 1. Entity Name 03-15-2004 90025 037 ****61.25 CLERISY, INC. Principal Place of Business Mailing Address 3100 NW 5TH AVENUE 3100 NW 5TH AVENUE **BOCA RATON FL 33431 BOCA RATON FL 33431** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #. etc. CR2E037 (11/03) Applied For City & State 4. FEI Number City & State 65-0423363 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent VAN VORHIS, DAVID C Street Address (P.O. Box Number is Not Acceptable) **1240 SW 21ST STREET BOCA RATON FL 33486** Zip Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required who Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Delete TITLE ☐ Channe ☐ Addition TITLE ALMAND, JUDITH NAME NAME 1705 SLOOP PLACE STREET ADDRESS STREET ADDRESS **BRANDON FL** CITY-ST-ZIP CITY-ST-ZIP SD Delete TITLE ☐ Addition TITLE GODDARD, GRETCHEN NAME NAME 5450 N OCEAN BLVD #13 -STREET ADDRESS STREET ADDRESS LAUDERDALE-BY-THE-SEA FL 33308 CITY-ST-ZIP CITY-ST-ZIP PSTO **Change** ☐ Addition ☐ Delete TITLE TITLE VAN VOORHIS, DAVID C. ---NAME NAME 1240 SW 21ST STREET STREET ADDRESS STREET ADDRESS 33486 BOCA RATON FL **BOCA RATON FL** CITY-ST-ZIP CITY-ST-ZIP νD Change Change ☐ Delete TITLE Addition TITLE CALMBACHER, PATRICIA NAME NAME 3426 REYNOLDSWOOD DR. STREET ADDRESS STREET ADDRESS **TAMPA FL 33618** CITY - ST - ZIP CITY-ST-7IP Delete ☐ Change ☐ Addition TITLE TITLE KRAMER, WILLIAM NAME NAME 1 BOCA PL.-#411E /2255 GLADES RD. STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP CITY-ST-ZIP νD Addition Delete TITLE ☐ Change TITLE VAN NAME NAME 1240 STREET ADDRESS STREET ADDRESS RATON, 33486 CITY-ST-ZIP CITY-ST-ZIP BOCA 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. I further 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 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 in Block 10 or Block 11 if

VOOR HIS

561-368-6024

DAVID C. VAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED