## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000005260

FILED Apr 19, 2010 Secretary of State

Entity Name: CENTRAL FLORIDA CENTER FOR SPIRITUAL LIVING INC.

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

622 N. THORNTON AVE SUITE C

ORLANDO, FL 32803 US

Current Mailing Address: New Mailing Address:

P.O. BOX 940310

MAITLAND, FL 32794 US

FEI Number: 59-3216505 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JOHN A. DEPALMA 1329 AMERICAN ELM DRIVE ALTAMONTE SPRINGS, FL 32714 US

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: PD

Name: DEPALMA, JOHN REV
Address: 1329 AMERICAN ELM DR.
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VD

Name: DEPALMA, CATHERINE Z
Address: 1329 AMERICAN ELM DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D

 Name:
 STAHL, LOIS

 Address:
 1425 GRAND ROAD

 City-St-Zip:
 WINTER PARK, FL 32792

Title:

 Name:
 DIAZ, ANTHONY

 Address:
 914 W. PRINCETON ST.

 City-St-Zip:
 ORLANDO, FL 32804

Title:

 Name:
 GRASSELER, VELMA

 Address:
 2706 E.WINTER PARK RD

 City-St-Zip:
 WINTER PARK, FL 32789

Title:

 Name:
 ROSS, MADELINE

 Address:
 1326 PALMETTO AVE

 City-St-Zip:
 WINTER PARK, FL 32789

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: JOHN A. DEPALMA PRES 04/19/2010