

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004504

FILED
Jan 29, 2009
Secretary of State

Entity Name: FLORIDA INDEPENDENT LIVING COUNCIL, INC.

Current Principal Place of Business:

1018 THOMASVILLE RD., STE. 100-A
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

1416 N. ADAMS STREET
TALLAHASSEE, FL 32303 US

Current Mailing Address:

1018 THOMASVILLE RD., STE. 100-A
TALLAHASSEE, FL 32303 US

New Mailing Address:

1416 N. ADAMS STREET
TALLAHASSEE, FL 32303 US

FEI Number: 59-3587277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOSLINE, MOLLY J
1018 THOMASVILLE ROAD STE. 100-A
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

GOSLINE, MOLLY J
1416 N. ADAMS STREET
TALLAHASSEE, FL 32303 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:

01/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SACHS, PETER
Address: 301 YAMATO RD., STE. 4150
City-St-Zip: BOCA RATON, FL 33431 US

Title: T () Delete
Name: ARCHER, ROSE L
Address: 398 MOHAWK LANE
City-St-Zip: BOCA RATON, FL 33487 US

Title: S () Delete
Name: HALL, DOUG
Address: 1405 EDGEWATER RD.
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: 1VP () Delete
Name: MILES, HOLLY
Address: 2201 S. CHURCH AVE.
City-St-Zip: TAMPA, FL 38629 US

Title: 2VP () Delete
Name: TICKLE, ROBERTA V
Address: 4082 CHESTNUT AVE
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: MAL () Delete
Name: FORSELL, REBECCA
Address: 4508 STONEHENGE RD.
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: 2VP (X) Change () Addition
Name: VAN SICKLE, ROBERTA
Address: 4082 CHESTNUT AVE
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: MOLLY J. GOSLINE

ED

01/29/2009

Electronic Signature of Signing Officer or Director

Date