

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000024608

**FILED**  
**Jan 31, 2012**  
**Secretary of State**

**Entity Name:** A NEW DAWN-SUPPORTED LIVING PROVIDER, INC.

**Current Principal Place of Business:**

7789 PIONTE VICENTE CT.  
JACKSONVILLE, FL 32256 03

**New Principal Place of Business:**

**Current Mailing Address:**

7789 PIONTE VICENTE CT.  
JACKSONVILLE, FL 32256 03

**New Mailing Address:**

**FEI Number:** 30-0014692      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

SIBLEY, LITHO D  
7789 POINT VICENTE CT  
JACKSONVILLE, FL 32256 US

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

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:** CEO  
**Name:** SIBLEY, LITHO D  
**Address:** 7789 POINT VICENTE COURT  
**City-St-Zip:** JACKSONVILLE, FL 32256

**Title:** CEO  
**Name:** SIBELEY, LITHO D  
**Address:** 7789 POINT VICENTE CT  
**City-St-Zip:** JACKSONVILLE, FL 32256

**Title:** D  
**Name:** SIBLEY, LITHO D  
**Address:** 7789 POINT VICENTE CT  
**City-St-Zip:** JACKSONVILLE, FL 32256

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LITHO D SIBLEY

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

CEO

01/31/2012

\_\_\_\_\_  
Date