

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000020982

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** SUPPORT INDEPENDENT LIVING INC.

**Current Principal Place of Business:**

11 RACETRACK RD  
SUITE C2  
FORT WALTON BEACH, FL 32547

**New Principal Place of Business:**

**Current Mailing Address:**

11 RACETRACK RD  
SUITE C2  
FORT WALTON BEACH, FL 32547

**New Mailing Address:**

**FEI Number:** 56-2515419

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARRIER, BRENDA  
2276 SALAMANCA STREET  
NAVARRE, FL 32566 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: PD  
Name: MARRIER, BRENDA  
Address: 2276 SALAMANCA STREET  
City-St-Zip: NAVARRE, FL 32566

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: BRENDA MARRIER

PRES

04/30/2012

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

\_\_\_\_\_ Date