2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000074318

Entity Name: CONFIDENT LIVING ADAPTATIONS, INC.

FILED Jan 13, 2008 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | |
|--------------------------------------|--|--------------------------------|---|---|
| 546 WHE | ATSTONE PLA | CE | | |
| | D, FL 32835 | US | | |
| Current Mailing Address: | | | New Mailing Address: | |
| | ATSTONE PLA | | | |
| ORLANDO | O, FL 32835 | US | | |
| FEI Number | : 57-1237199 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired (X) |
| Name and | d Address of C | urrent Registered Agent: | Name and Address o | f New Registered Agent: |
| 546 WHE | DEZ, ALEXANI ATSTONE PLA D, FL 32835 | | | |
| | e named entity : e of Florida. | submits this statement for the | ourpose of changing its registered | d office or registered agent, or both, |
| SIGNATU | RE: | | | |
| | Electror | ic Signature of Registered Ag | ent | Date |
| Election Ca | mpaign Financin | g Trust Fund Contribution (). | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | |
| Title: | Р () | Delete | Title: | () Change () Addition |
| Name: | LEARY, PATRI | CK D | Name: | |
| Address: | P.O BOX 1424 | 3 | Address: | |
| City-St-Zip: | GAINESVILLE, | FL 32604 US | City-St-Zip: | |
| Title: | VP (| Delete | Title: | () Change () Addition |
| Name: | HERNANDEZ, A | ALEXANDER C | Name: | |
| Address: | 546 WHEATST | ONE PLACE | Address: | |
| City-St-Zip: | ORLANDO, FL | 32835 US | City-St-Zip: | |
| Title: | TRES (| Delete | Title: | () Change () Addition |
| Name: | KILMER, CHAD | R | Name: | |
| Address: | 7804 HYACINT | H DRIVE | Address: | |
| City-St-Zip: | ORLANDO, FL | 32835 | City-St-Zip: | |
| Title: | SEC (| Delete | Title: | () Change () Addition |
| Name: | HERNANDEZ, I | | Name: | • |
| Address: | 546 WHEATST | | Address: | |
| City-St-Zin | | | City-St-Zin: | |

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

SIGNATURE: ALEXANDER HERNANDEZ VP 01/13/2008