

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000039697

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**Entity Name:** ASSOCIATION FOR INDEPENDENCE DEVELOPMENT INC.

**Current Principal Place of Business:**

3840 W HILLSBORO BLVD  
SUITE 206  
DEERFIELD BEACH, FL 33442

**New Principal Place of Business:**

701 S SWINTON AVE  
DELRAY BEACH, FL 33444

**Current Mailing Address:**

3840 W HILLSBORO BLVD  
SUITE 206  
DEERFIELD BEACH, FL 33442

**New Mailing Address:**

701 S SWINTON AVE  
DELRAY BEACH, FL 33444

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

HOOTS, SHANNON  
3840 W HILLSBORO BLVD  
SUITE 206  
DEERFIELD BEACH, FL 33442 US

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

HOOTS, SHANNON  
701 S SWINTON AVE  
DELRAY BEACH, FL 33444 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: SHANNON E HOOTS

02/23/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: HOOTS, SHANNON  
Address: 701 S SWINTON AVE  
City-St-Zip: DELRAY BEACH, FL 33444

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: SHANNON E HOOTS

PRES

02/23/2011

Electronic Signature of Signing Officer or Director

Date