

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000008427

FILED
Jan 15, 2004
Secretary of State

Entity Name: COMMUNITY LIVING OPTIONS, INC.

Current Principal Place of Business:

4318 LITHIA-PINECREST RD.
VALRICO, FL 33594

New Principal Place of Business:

Current Mailing Address:

4318 LITHIA-PINECREST RD.
VALRICO, FL 33594

New Mailing Address:

FEI Number: 59-3166975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HULLAR, ROBERT W
9417 PRINCESS PALM AVE.
TAMPA, FL 33619 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: MACDOUGALL, DAVID
Address: 4318 LITHIA-PINECREST RD.
City-St-Zip: VALRICO, FL 33594

Title: VS () Delete
Name: PARKER, CHRISTINE
Address: 4318 LITHIA PINECREST ROAD
City-St-Zip: VALRICO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID MACDOUGALL

PT

01/15/2004

Electronic Signature of Signing Officer or Director

Date