

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# 711630

Entity Name: CEREBRAL PALSY ADULT HOME, INCORPORATED

Current Principal Place of Business:

1405 NORTHWEST 10TH STREET
DANIA BEACH, FL 33004

Current Mailing Address:

1405 NW 10TH STREET
DANIA BEACH, FL 33004-2399 US

FEI Number: 59-1161328

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MACLEAN AND EMA, P.A.
2600 NE 14TH STREET CAUSEWAY
POMPAÑO BEACH, FL 33062 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: ADAN A. AULET, JR., ESQ.

08/11/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR, TREASURER

Name SHINE, RANDOLPH

Address 1405 NW 10TH STREET

City-State-Zip: DANIA BEACH FL 33004-2399

Title DIRECTOR, VP

Name TACQUARD, BRANDA

Address 1405 NW 10TH STREET

City-State-Zip: DANIA BEACH FL 33004-2399

Title DIRECTOR, SECRETARY

Name DEMARE, GRIFFITH

Address 1405 NW 10TH STREET

City-State-Zip: DANIA BEACH FL 33004-2399

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

SIGNATURE: RANDOLPH J SHINE

PRESIDENT

08/11/2021

Electronic Signature of Signing Officer/Director Detail

Date