2025 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 13, 2025
Secretary of State
5327792265CC

DOCUMENT# 712143

Entity Name: COOPERATIVE LIVING ORGANIZATION, INC.

Current Principal Place of Business:

117 NW 15TH STREET
GAINESVILLE, FL 32603

Current Mailing Address:

117 NW 15TH STREET
GAINESVILLE, FL 32603 US

FEI Number: 59-0205245

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHARPE, HUNTER
1 FISHERMAN'S CIRCLE
APT. 6
ORMOND BEACH, FL 32174 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: HUNTER SHARPE 06/13/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	HOUSE MANAGER
Name	RANA, RAHEELA
Address	117 NW 15TH STREET
City-State-Zip:	GAINESVILLE FL 32603

Title	PRESIDENT
Name	WALLEY, SETH
Address	117 NW 15TH STREET
City-State-Zip:	GAINESVILLE FL 32603

Title	PROPERTY MANAGER
Name	SHARPE, HUNTER
Address	1 FISHERMAN'S CIRCLE APT. 6
City-State-Zip:	ORMOND BEACH FL 32174

Title	VP
Name	REGISTER, FAITH
Address	117 NW 15TH STREET
City-State-Zip:	GAINESVILLE FL 32603

Title	OPERATIONS COMMITTEE MEMBER
Name	PALEY, ISAAC
Address	4243 SPRING OAK DRIVE
City-State-Zip:	CHARLOTTE NC 28208

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: HUNTER SHARPE PROPERTY MANAGER 06/13/2025

Electronic Signature of Signing Officer/Director Detail — Date