

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712143

Entity Name: COOPERATIVE LIVING ORGANIZATION, INC.

Current Principal Place of Business:

117 N.W. 15TH STREET
GAINESVILLE, FL 32603

Current Mailing Address:

117 N.W. 15TH STREET
GAINESVILLE, FL 32603

FEI Number: 59-0205245

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRATERNITY MANAGEMENT
8108 SW 56TH AVE
GAINESVILLE, FL 32608 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name WILSON, MCKENNA
Address 117 NORTHWEST 15TH STREET
City-State-Zip: GAINESVILLE FL 32603

Title VP
Name DUQUE, SEBASTIAN
Address 117 N.W. 15TH ST
City-State-Zip: GAINESVILLE FL 32603

Title TREASURER, HOUSE MANAGER
Name MISHRA, SUBHANKAR
Address 117 NORTHWEST 15TH STREET
City-State-Zip: GAINESVILLE FL 32603

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: MCKENNA WILSON

PRESIDENT

04/11/2016

Electronic Signature of Signing Officer/Director Detail

Date