

2022 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:**SHARPE, HUNTER
9 RICHFIELD LANE
PALM COAST, FL 32164 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

01/05/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	HOUSE MANAGER
Name	DAWE, PARKER
Address	117 N.W. 15TH STREET
City-State-Zip:	GAINESVILLE FL 32603

Title	VP
Name	SHOEMAKER, MATTHEW
Address	117 N.W. 15TH STREET
City-State-Zip:	GAINESVILLE FL 32603

Title	PRESIDENT
Name	JANVIER, YAMINE
Address	117 N.W. 15TH STREET
City-State-Zip:	GAINESVILLE FL 32603

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

Title	PROPERTY MANAGER
Name	SHARPE, HUNTER
Address	2818 KRAMER LANE APT. 4405
City-State-Zip:	AUSTIN TX 78758

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

01/05/2022

Electronic Signature of Signing Officer/Director Detail

Date