2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728842

Entity Name: CENTER FOR SPIRITUAL LIVING CAPE CORAL, INC.

Current Principal Place of Business:

406 S E 24TH AVENUE CAPE CORAL, FL 33990

Current Mailing Address:

406 S E 24TH AVENUE CAPE CORAL, FL 33990

FEI Number: 59-1497339

Name and Address of Current Registered Agent:

FROST, RONALD EPRES. 2135 SE 15TH STREET CAPE CORAL, FL 33990 US FILED Feb 20, 2014

Secretary of State

CC4856681515

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	PD	Title	SD
Name	FROST, RONALD EPRES.	Name	LAMBERT, PAMELA SEC.
Address	2135 SE 15TH STREET	Address	1925 CLIFFORD ST., UNIT 1201
City-State-Zip:	CAPE CORAL FL 33990	City-State-Zip:	FORT MYERS FL 33901
Title	TD	Title	TR
Name	COYKENDALL, MALLIKA	Name	RUDLAND, MARK TRUSTEE
Address	242 ALAMEDA AVENUE	Address	1400 NW 10TH STREET
City-State-Zip:	FORT MYERS FL 33905	City-State-Zip:	CAPE CORAL FL 33993
Title	TR	Title	TR
Title Name	TR GAUVREAU, DEBORAH TRUSTEE	Title Name	TR GAUVREAU, EMILE TRUSTEE
Name	GAUVREAU, DEBORAH TRUSTEE 4918 SW SKYLINE BLVD.	Name	GAUVREAU, EMILE TRUSTEE
Name Address	GAUVREAU, DEBORAH TRUSTEE 4918 SW SKYLINE BLVD.	Name Address	GAUVREAU, EMILE TRUSTEE 4918 SW SKYLINE BLVD.
Name Address City-State-Zip:	GAUVREAU, DEBORAH TRUSTEE 4918 SW SKYLINE BLVD. CAPE CORAL FL 33914	Name Address City-State-Zip:	GAUVREAU, EMILE TRUSTEE 4918 SW SKYLINE BLVD. CAPE CORAL FL 33914
Name Address City-State-Zip: Title	GAUVREAU, DEBORAH TRUSTEE 4918 SW SKYLINE BLVD. CAPE CORAL FL 33914 TRUSTEE	Name Address City-State-Zip: Title	GAUVREAU, EMILE TRUSTEE 4918 SW SKYLINE BLVD. CAPE CORAL FL 33914 TRUSTEE
Name Address City-State-Zip: Title Name	GAUVREAU, DEBORAH TRUSTEE 4918 SW SKYLINE BLVD. CAPE CORAL FL 33914 TRUSTEE LOEWENSTEIN, EMILY 5793 CAPE HARBOUR DRIVE #1114	Name Address City-State-Zip: Title Name	GAUVREAU, EMILE TRUSTEE 4918 SW SKYLINE BLVD. CAPE CORAL FL 33914 TRUSTEE SITKA, ALEXIS

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: RONALD FROST

PRESIDENT

02/20/2014

Electronic Signature of Signing Officer/Director Detail

Date