2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728842

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

FILED Apr 24, 2018 **Secretary of State** CC9136109452

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 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REDFERN, MICHEL L. 1028 SE 20TH AVENUE CAPE CORAL, FL 33990 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: MICHEL L. REDFERN 04/24/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title VICE PRESIDENT O'BRIANT, PATRICK CORRIEL, JOHN Name Name 2710 DELPRADO BLVD. 1704NW 41ST AVENUE Address

Address

UNIT 2-211

CAPE CORAL FL 33993 City-State-Zip: City-State-Zip: CAPE CORAL FL 33904

Title **TREASURER**

Title **SECRETARY** Name KAREN, GIDLEY

Name LACHAPELLE, SYLVIA Address 410 MAPLE DRIVE SW

12701 MASTIQUE BEACH BLVD. Address City-State-Zip: LABELLE FL 33935

#902

City-State-Zip: FT. MYERS FL 33908 Title **TRUSTEE**

Title **TRUSTEE** Name REDFERN, MICHEL L.

Name JENNINGS, DAVID R 1028 SE 20TH AVENUE Address Address 4218 SW 6TH AVENUE City-State-Zip: CAPE CORAL FL 33990

> City-State-Zip: CAPE CORAL FL 33914

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.

04/24/2018 SIGNATURE: MICHEL L. REDFERN TRUSTEE