

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007983

Entity Name: THE CENTER FOR NON-VIOLENCE LEARNING, INC.

Current Principal Place of Business:

1013 HOWELL HARBOR DR.
CASSELBERRY, FL 32707

Current Mailing Address:

P.O. BOX 4608
WINTER PARK, FL 32793

FEI Number: 30-0000785

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SPENCER, BETTY A
1013 HOWELL HARBOR DRIVE
CASSELBERRY, FL 32707 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 CEOP
Name SPENCER, BETTY
Address 1013 HOWELL HARBOR DRIVE
City-State-Zip: CASSELBERRY FL 32707

Title OFFICER
Name KELLY, CHARLES E
Address P.O. BOX 193
City-State-Zip: LACROSSE FL 32658-0193

Title VP
Name LEHMAN, MICHAEL
Address 5703 RED BUG LK RD. # 167
City-State-Zip: WINTER SPRINGS FL 32807

Title OFFICER
Name JONES, MAEDA
Address 13 SUNSET DRIVE
City-State-Zip: DEBARY FL 32713

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: BETTY SPENCER

CEO

03/25/2014

Electronic Signature of Signing Officer/Director Detail

Date