

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000012090

**Entity Name:** CENTER FOR EFFECTIVE LIVING, INC.

**Current Principal Place of Business:**

2259 SAINT CHARLES DR  
CLEARWATER, FL 33764-4941

**Current Mailing Address:**

1502 MISSION HILLS BLVD  
CLEARWATER, FL 33759 US

**FEI Number: 30-0454917**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SASSOUNI, CHRIS G  
2259 SAINT CHARLES DR  
CLEARWATER, FL 33764-4941 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, VP  
Name SASSOUNI, CHRIS G  
Address 2259 SAINT CHARLES DR  
City-State-Zip: CLEARWATER FL 33764-4941

Title ST  
Name HIGGINS, DEBORA C  
Address 1502 MISSION HILLS BLVD  
City-State-Zip: CLEARWATER FL 33759

*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: DEBORA HIGGINS**

**SECRETARY/TREASURER 01/20/2023**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date