

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43974

Entity Name: CENTER FOR INDEPENDENT LIVING OF BROWARD, INC.

Current Principal Place of Business:

4800 NORTH STATE ROAD 7
SUITE 102
LAUDERDALE LAKES, FL 33319

Current Mailing Address:

4800 NORTH STATE ROAD 7
SUITE 102
LAUDERDALE LAKES, FL 33319 US

FEI Number: 65-0292125

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HINDS, COREY
4800 N. STATE ROAD 7, SUITE 102
LAUDERDALE LAKES, FL 33319 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 CEO
Name HINDS, COREY
Address 4800 NORTH STATE ROAD 7
SUITE 102
City-State-Zip: LAUDERDALE LAKES FL 33319

Title S
Name MENEKOU, LAURIE
Address 4800 N. STATE ROAD 7, SUITE 102
City-State-Zip: LAUDERDALE LAKES FL 33319

Title D
Name ANDERSON, JAMES
Address 3941 NW 30TH TERRACE, #3
City-State-Zip: LAUDERDALE LAKES FL 33309

Title P
Name LILIENTHAL, CRAIG
Address 340 SUNSET DRIVE, #410
City-State-Zip: FT. LAUDERDALE FL 33301

Title T
Name SMITH, SHEA
Address 515 EAST LAS OLAS BOULEVARD,
15TH FLOOR
City-State-Zip: FT. LAUDERDALE FL 33301

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: COREY HINDS

CEO

01/25/2016

Electronic Signature of Signing Officer/Director Detail

Date