2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N50367

Entity Name: CENTER FOR INDEPENDENT LIVING OF SOUTH FLORIDA, INC.

FILED Nov 21, 2024 Secretary of State 0795016044CC

Current Principal Place of Business:

4770 BISCAYNE BLVD

150

MIAMI, FL 33137

Current Mailing Address:

4770 BISCAYNE BLVD 150

MIAMI, FL 33137 US

FEI Number: 65-0379532 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

RODRIGUEZ, MARIA 4770 BISCAYNE BLVD 150 MIAMI, FL 33137 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: MARIA RODRIGUEZ 11/21/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

City-State-Zip:

Title	PRESIDENT	Title	SECRETARY, TREASURER
Name	ROBERTS, ALVIN	Name	CHIERNO, SKINNER
Address	P. O. BOX 380251	Address	780 NW 42 AVE
City-State-Zip:	MIAMI FL 33238-0251	City-State-Zip:	MIAMI FL 33126

Title VP Title OFFICER

NameGREGORY, DAMIANNameRODRIGUEZ, MARIAAddress11342 SW 163 STAddress4770 BISCAYNE BLVD150

MIAMI FL 33157

City-State-Zip: MIAMI FL 33137

Title DIRECTOR Title DIRECTOR

Name GOLDFARB, GREGG Name GREENE, KELLY
Address 200 OCEAN DRIVE

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI FL 33168

Address

12 NW 116 STREET

OFFICER

SIGNATURE: RODRIGUEZ, MARIA

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.