

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000080039

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

**Current Principal Place of Business:**

3434 TORRE BLVD  
NEW SMYRNA BEACH, FL 32168

**Current Mailing Address:**

3434 TORRE BLVD  
NEW SMYRNA BEACH, FL 43168 US

**FEI Number:** 52-2372797

**Certificate of Status Desired:** No

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

DUNN, STARLENE S  
3434 TORRE BLVD  
NEW SMYRNA BEACH, FL 32168 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            PRES  
Name            DUNN, JEFFREY A  
Address        3434 TORRE BLVD  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title            SECT  
Name            DUNN, STARLENE S  
Address        3434 TORRE BLVD  
City-State-Zip: NEW SMYRNA BEACH FL 32168

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JEFFREY DUNN

**PRES.**

**05/28/2015**

Electronic Signature of Signing Officer/Director Detail

Date