

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000019469

**Entity Name:** CLN OF SOUTH FLORIDA, IUNC.**Current Principal Place of Business:**2336 CYPRESS LANE  
BELLE GLADE, FL 33430**Current Mailing Address:**2336 CYPRESS LANE  
BELLE GLADE, FL 33430**FEI Number:** 65-0918034**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KANE, KEVIN A  
2336 CYPRESS LANE  
BELLE GLADE, FL 33430 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:** KEVIN A KANE

04/08/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name KANE, KEVIN A  
Address 814 FOREST GLEN LANE  
City-State-Zip: WELLINGTON FL 33414

Title VTD  
Name KANE, DAVID P  
Address 2336 CYPRESS LANE  
City-State-Zip: BELLE GLADE FL 33430

Title VP  
Name KANE, DAVID P  
Address 2336 CYPRESS LANE  
City-State-Zip: BELLE GLADE FL 33430

Title CHIEF INFORMATION OFFICER  
Name KANE, DOREEN D  
Address 814 FOREST GLEN LANE  
City-State-Zip: WELLINGTON FL 33414

Title CHIEF OPERATIONS OFFICER  
Name KANE, MATTHEW A  
Address 15601 CEDAR GROVE LANE  
City-State-Zip: WELLINGTON FL 33414

*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:** KEVIN A. KANE

PRES.

04/08/2019

Electronic Signature of Signing Officer/Director Detail

Date