

2018 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

01/11/2018

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

01/11/2018

Electronic Signature of Signing Officer/Director Detail

Date