

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004192

FILED  
Apr 18, 2011  
Secretary of State

**Entity Name:** CHRISTIAN LIFE FOUNDATION MINISTRIES, INCORPORATED

**Current Principal Place of Business:**

9026 NW 20TH AVENUE  
MIAMI, FL 33147 US

**New Principal Place of Business:**

**Current Mailing Address:**

12340 W. GOLF DRIVE  
MIAMI, FL 331671845 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

TERRY, JAMES L  
12340 WEST GOLF DRIVE  
MIAMI, FL 331671845 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: TERRY, JAMES L  
Address: 12340 WEST GOLF DRIVE  
City-St-Zip: MIAMI, FL 33167

Title: S  
Name: SCOTT, GENICE  
Address: 1010 SHARAR AVE  
City-St-Zip: OPA LOCKA, FL 33056

Title: BMT  
Name: SLATER, SHENIKA  
Address: 17311 NW 34TH AVENUE  
City-St-Zip: CAROL CITY, FL 33056

Title: BMT  
Name: COOLEY, EDNA  
Address: 1521 NW 56TH STREET  
City-St-Zip: MIAMI, FL 33142

Title: BMT  
Name: JULMISTE, DOROTHY  
Address: PO BOX 540963  
City-St-Zip: OPA LOCKA, FL 33054

Title: BMTT  
Name: WALLACE, EDDIE  
Address: 9026 NW 20TH AVENUE (MAIL)  
City-St-Zip: MIAMI, FL 33147

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: JAMES L. TERRY

PD

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date