

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jul 15, 2010
Secretary of State**

DOCUMENT# N97000004496

Entity Name: WACTOR TEMPLE LIVING/LEARNING CENTER, INC.**Current Principal Place of Business:**5632 NW 31ST AVE.
MIAMI, FL 33142**New Principal Place of Business:****Current Mailing Address:**5632 NW 31ST AVE.
MIAMI, FL 33142**New Mailing Address:****FEI Number:** 65-0780884**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MEANS, REV.DR.MAENELL
1747 RODMAN STREET
UNIT 310
HOLLYWOOD, FL 33020 US**Name and Address of New Registered Agent:**SMITH, REV.DRTENERAMIE
981 NE 169TH STREET 212
NORTH MIAMI BEACH, FL 33162 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: REV. DR. TENERAMIE C. SMITH

07/15/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: SMITH, REV.DRTENERAMIE C
Address: 981 NE 169TH STREET 212
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: PST
Name: SINGLETON, ELIZABETH
Address: 3101 NW 161 TERR
City-St-Zip: OPA LOCKA, FL 33054

Title: SEC
Name: WILLIAMS-MCKINNEY, DEBBIE
Address: 8201 N.W. 6TH AVENUE
City-St-Zip: MIAMI, FL 33150

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: REV. DR. TENERAMIE C. SMITH

PRES

07/15/2010

Electronic Signature of Signing Officer or Director

Date