2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761785

Entity Name: FOOD FOR THE POOR, INC.

Current Principal Place of Business:

6401 LYONS RD

COCONUT CREEK, FL 33073

Current Mailing Address:

6401 LYONS RD

COCONUT CREEK, FL 33073 US

FEI Number: 59-2174510 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PRICE, DAVID TESQ 6401 LYONS RD

COCONUT CREEK, FL 33073 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

FILED Jan 09, 2015

Secretary of State

CC4888590253

Officer/Director Detail:

Title PDIR Title O

Name MAHFOOD, ROBIN G Name ALOMA, ANGEL A
Address 6401 LYONS RD Address 6401 LYONS RD

City-State-Zip: COCONUT CREEK FL 33073 City-State-Zip: COCONUT CREEK FL 33073

Title DIR Title DIR

Name KENNEDY, TODD P Name BENSON, WILLIAM G

Address 14 SE 4TH STREET Address 6550 N FEDERAL HWY STE 410

SUITE 36

City-State-Zip: FORT LAUDERDALE FL 33308

Title O, SECRETARY

Name PRICE, DAVID T ESQ.

VERY REVEREND MONSIGNOR

RAMKISSOON, OJ, GREGORY Address 6401 LYONS RD

Address 1 MAHOE DRIVE City-State-Zip: COCONUT CREEK FL 33073

City-State-Zip: KINGSTON 11, JAMAICA XXXXX Title DIRECTOR

Title DIRECTOR Name MOST REVEREND DUMAS, PIERRE-

ANDRE

Name BONINA, GRACE Address BEL AIR MIRAGOANE/ANSE-AL-VEAU

Address 10105 UMBERLAND PLACE City-State-Zip: HAITI XXXXX

City-State-Zip: BOCA RATON FL 33428

Continues on page 2

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: DAVID T. PRICE SECRETARY 01/09/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name RT. REV. FRADE, D.D., LEOPOLD Name MAINGOT, RHONDA
Address 525 N.E. 15TH ST. Address 109 FREDERICK ST.

City-State-Zip: MIAMI FL 33132 City-State-Zip: PORT OF SPAIN, TRINIDAD XXXXX

Title DIRECTOR Title DIRECTOR, TREASURER

Name HIS EMINENCE OSCAR, ANDRE CARDINAL Name MOST REVEREND MCPHERSON,

RODRIGUEZ MARADIAGA BURCHELL

Address CASA 1113 APARTADO POSTAL 106 Address 1-3 FORT STREET P O BOX 197

City-State-Zip: TEGUCIGALPA, HONDURAS XXXXX City-State-Zip: MONTEGO BAY, JAMAICA XXXXX

Title DIRECTOR Title DIRECTOR

Name NASRALLAH, LYNNE DR. Name MOST REVEREND MCGRATH, D.D.,

Address 1614 GAY DRIVE J.C.D., PATRICK J

City-State-Zip: ORLANDO FL 32803 Address 1150 N. FIRST STREET

SUITE 100

City-State-Zip: SAN JOSE CA 95112