

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000007745

**FILED**  
**Apr 28, 2014**  
**Secretary of State**  
**CC2458188688**

**Entity Name:** A BETTER LIFE FOUNDATION, INC.

**Current Principal Place of Business:**

135 SAN LORENZO AVENUE  
SUITE 820  
CORAL GABLES, FL 33146

**Current Mailing Address:**

135 SAN LORENZO AVENUE  
SUITE 820  
CORAL GABLES, FL 33146 US

**FEI Number:** 20-1830671

**Certificate of Status Desired:** No

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

A&A REGISTERED AGENT, INC.  
135 SAN LORENZO AVENUE  
SUITE 820  
CORAL GABLES, FL 33146 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

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            HOEGH, ANDERS  
Address        1105 PLACETAS AVE.  
City-State-Zip: CORAL GABLES FL 33146

Title            DIRECTOR  
Name            CASSEL, MINDY  
Address        5935 CHAPMAN FIELDS DRIVE  
City-State-Zip: MIAMI FL 33156

Title            SECRETARY, DIRECTOR  
Name            BLACKMAN, JOAN  
Address        1105 PLACETAS AVE.  
City-State-Zip: CORAL GABLES FL 33146

Title            DIRECTOR  
Name            SUTHERLAND, VICTORIA  
Address        3859 CARBON CANYON ROAD  
City-State-Zip: MALIBU CA 90265

Title            DIRECTOR  
Name            FINE, DAWN  
Address        5300 FAIRCHILD WAY  
City-State-Zip: CORAL GABLES FL 33156

Title            TREASURER, DIRECTOR  
Name            JENSEN, TROND  
Address        6120 RIVIERA DRIVE  
City-State-Zip: CORAL GABLES FL 33146

Title            DIRECTOR  
Name            MILNE , HENDRIK G  
Address        2250 SUNTRUST INTERNATIONAL  
                  CENTER  
                  ONE SOUTHEAST THIRD AVENUE  
City-State-Zip: MIAMI FL 33131

Title            DIRECTOR  
Name            ROMERO, CHRISTIAN  
Address        1932 TYLER STREET  
City-State-Zip: HOLLYWOOD FL 33020

**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:** ANDERS HOEGH

**PRESIDENT**

**04/28/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            CHAVIES, MICHAEL B  
Address        ONE SOUTHEAST THIRD AVENUE  
City-State-Zip: MIAMI FL 33131