

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000000146

FILED
Apr 22, 2015
Secretary of State
CC6729094209

Entity Name: SHAKTI LIFE FOUNDATION, INC.

Current Principal Place of Business:

459 INLAND WAY
ATLANTIC BEACH, FL 32233

Current Mailing Address:

459 INLAND WAY
ATLANTIC BEACH, FL 32233

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOOLEY, CARRIE Z
459 INLAND WAY
ATLANTIC BEACH, FL 32233 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 P
Name DOOLEY, CARRIE Z
Address 459 INLAND WAY
City-State-Zip: ATLANTIC BEACH FL 32233

Title VP
Name MULLINS, JILL
Address 1305 DONALD STREET
City-State-Zip: JACKSONVILLE FL 32205

Title TREASURER
Name RUSSELL, STAAR
Address 465 INLAND WAY
City-State-Zip: ATLANTIC BEACH FL 32233

Title SECRETARY
Name CARTER, MICHELLE
Address 315 SAILFISH DR E.
City-State-Zip: ATLANTIC BEACH FL 32233

Title D
Name MONS, JENNY
Address 2236 BAREFOOT TRACE
City-State-Zip: ATLANTIC BEACH FL 32233

Title D
Name HILL, DEBRA
Address 1003 2ND STREET N.
City-State-Zip: JACKSONVILLE FL 32250

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: CARRIE ZARKA DOOLEY

PRESIDENT

04/22/2015

Electronic Signature of Signing Officer/Director Detail

Date