

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

DOCUMENT# N13000007319

**FILED**  
**Jan 04, 2014**  
**Secretary of State**  
**CC2103381585**

**Entity Name:** LITTLE MIRACLES GIVING BACK INC.

**Current Principal Place of Business:**

630 TRAVIS CIRCLE  
LAKELAND, FL 33813

**Current Mailing Address:**

630 TRAVIS CIRCLE  
LAKELAND, FL 33813

**FEI Number:** 46-3165381

**Certificate of Status Desired:** Yes

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

WIESCHOWSKI, KATHERINE  
630 TRAVIS CIRCLE  
LAKELAND, FL 33813 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 D  
Name WIESCHOWSKI, KATHERINE  
Address 630 TRAVIS CIRCLE  
City-State-Zip: LAKELAND FL 33813

Title D  
Name CREMONE, LISA  
Address 200 EASTON BLVD  
City-State-Zip: SOUTH PLAINFIELD NJ 07080

Title D  
Name ROLLINS, JACALYN  
Address 831 HAMILTON PLACE DR.  
City-State-Zip: LAKELAND FL 33813

*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:** KATHERINE WIESCHOWSKI

**OWNER**

**01/04/2014**

Electronic Signature of Signing Officer/Director Detail

Date