

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

DOCUMENT# N13000010340

**Entity Name:** SURVIVING DAUGHTERS, INC.

**Current Principal Place of Business:**

5927 LEE VISTA BLVD  
#102  
ORLANDO, FL 32822

**Current Mailing Address:**

5927 LEE VISTA BLVD  
#102  
ORLANDO, FL 32822

**FEI Number:** 46-4126958

**Certificate of Status Desired:** Yes

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

CORPORATION SERVICES COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 BRAXTON, FETIMA  
Address 5927 LEE VISTA BLVD, #102  
City-State-Zip: ORLANDO FL 32822

Title D  
Name MARTIN, MARTHA  
Address 1641 FLOMICH STREET  
City-State-Zip: HOLLY HILL FL 32117

Title D  
Name BROWN, DOROTHY  
Address 52 ADAMS STREET  
City-State-Zip: MOUNT VERNON NY 10550

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:** FETIMA M. BRAXTON

**EXECUTIVE DIRECTOR**

**04/30/2014**

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

\_\_\_\_\_  
Date