#### **2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000002539

Entity Name: LIFE DEBT, INC.

FILED
Apr 02, 2020
Secretary of State
6421934458CC

### **Current Principal Place of Business:**

270 NE 57 STREET

FORT LAUDERDALE. FL 33334

## **Current Mailing Address:**

**270 NE 57 STREET** 

FORT LAUDERDALE, FL 33334 US

FEI Number: 82-0787890 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

RIZZO, PATRICIA 270 NE 57 STREET

FORT LAUDERDALE, FL 33334 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 Title VP

NameRIZZO, PATRICIANameMCDERMOTT, BARBARAAddress270 NE 57 STREETAddress1154 RIVER PARK BLVD

City-State-Zip: FORT LAUDERDALE FL 33334 City-State-Zip: NAPA CA 94559

Title ADV Title D

NameSIMMONS, CHRISTOPHER C IINameGEORGE, MARIEAddress2251 NW 41ST AVE #109Address11660 NE LARK AVECity-State-Zip:LAUDERHILL FL 33313City-State-Zip:STUART FL 34994

Title D Title CFOT

NameRIZZO, JOSEPHNameNGUYEN, THAOAddress270 NE 57 STAddress1189 SW 44TH AVE

City-State-Zip: FORT LAUDERDALE FL 33334 City-State-Zip: DEERFIELD BEACH FL 33442

Title S Title D

NameROGERS, BOBBINameMURPHY, CHRISTOPHERAddress8381 NW 68TH AVEAddress6467 DARLINGTON ST SWCity-State-Zip:TAMARAC FL 33321City-State-Zip: CARROLLTON OH 44615

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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: PATRICIA RIZZO PRESIDENT 04/02/2020

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title D

Name WESTER, CATHY
Address 35 ANDREW ST #7

City-State-Zip: MANCHESTER NH 03104

Title D

Name LOPEZ, MICHELLE Address 1720 NW 118TH AVE

City-State-Zip: PEMBROKE PINES FL 33026

Title [

Name RYAN, DARA

Address 611 SW 78TH TERRACE

City-State-Zip: NORTH LAUDERDALE FL 33068

Title D

Name DEMELLO, CANDACE

Address 409 FLOWING CREEK DR

City-State-Zip: EVANS GA 30809

Title D

Name ARCHER, JACK

Address 1606 N WEIBLE ST

City-State-Zip: POCAHONTAS AZ 72455