2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000012375

Entity Name: SAVE A LIFE MINISTRIES FLORIDA INC.

Current Principal Place of Business:

414 OLD DIXIE HWY AUBURNDALE, FL 33823

Current Mailing Address:

P.O. BOX 1963

AUBURNDALE, FL 33823 US

FEI Number: 46-2486332 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PHILLIPS, DARRELL W SR. 414 OLD DIXIE HWY AUBURNDALE, FL 33823 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:

City-State-Zip:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Feb 06, 2024

Secretary of State

7836695611CC

Officer/Director Detail:

Title PRESIDENT, PASTOR Title VP, TREASURER PHILLIPS, DARRELL W SR PHILLIPS, ALICIA J Name Name

P.O. BOX 1963 Address P.O. BOX 1963 Address

City-State-Zip: AUBURNDALE FL 33823 AUBURNDALE FL 33823 City-State-Zip:

Title **OFFICER** Title **OFFICER**

Name PHILLIPS, DARRELL W JR. Name REDMOND, BRYAN

Address 2040 RILE Address 601 ELMWOOD AVE

#46 MEMPHIS TN 38109 City-State-Zip: ROCHESTER NY 14262

Title **OFFICER**

Title **ELDER** Name WILLIAMS, JANET

Name PHILLIPS, MICHAEL Address P.O. BOX 1963

Address 771 TAMPA AVE. City-State-Zip: AUBURNDALE FL 33823

OFFICER Title

Name THOMAS, DANIELLE

MEMPHIS TN 38106

Address P.O. BOX 1963

City-State-Zip: AUBURNDALE FL 33823

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.

02/06/2024 SIGNATURE: DARRELL PHILLIPS **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date