

**2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N97000003755

**Entity Name:** MIRACLE OF LOVE, INC.

**Current Principal Place of Business:**

741 W COLONIAL DR.  
ORLANDO, FL 32804

**Current Mailing Address:**

741 W COLONIAL DR.  
ORLANDO, FL 32804 US

**FEI Number: 59-3455949**

**Certificate of Status Desired:** No

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

NORTON, NICOLA D  
5132 CONROY RD  
APT 924  
ORLANDO, FL 32811 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:** NICOLA D NORTON

08/02/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title ED  
Name NORTON, NICOLA D  
Address 5132 CONROY RD  
APT 924  
City-State-Zip: ORLANDO FL 32811

Title SEC  
Name REEVES, ANTHONY  
Address 763 LEONARDO COURT  
City-State-Zip: KISSIMMEE FL 34758

Title ACTING PRES  
Name SMITH, DANIEL  
Address 4028 MIDDLEBROOK RD APT 1527  
City-State-Zip: ORLANDO FL 32811

Title BM  
Name BARINAS, JOAQUIN  
Address 2064 TILLMAN AVE  
City-State-Zip: WINTER GARDEN FL 34787

Title BM  
Name THERIOT, KEITH  
Address 741 W COLONIAL DR  
City-State-Zip: ORLANDO FL 32804

Title TREASURER  
Name SMITH, DANIEL  
Address 4028 MIDDLEBROOK RD  
APT 1527  
City-State-Zip: ORLANDO FL 32811

*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:** NICOLA D NORTON

ED

08/02/2013

Electronic Signature of Signing Officer/Director Detail

Date