

2016 FLORIDA NOT FOR PROFIT CORPORATION 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:** Yes**Name and Address of Current Registered Agent:**NORTON, NICOLA D
741 W. COLONIAL DR.
ORLANDO, FL 32804 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

02/10/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	ED
Name	NORTON, NICOLA D
Address	741 W COLONIAL DR.
City-State-Zip:	ORLANDO FL 32804

Title	SEC
Name	REEVES, ANTHONY
Address	741 W COLONIAL DR.
City-State-Zip:	ORLANDO FL 32804

Title	BM
Name	BARINAS, JOAQUIN
Address	741 W COLONIAL DR.
City-State-Zip:	ORLANDO FL 32804

Title	VICE PRESIDENT, VP
Name	THERIOT, KEITH
Address	741 W COLONIAL DR.
City-State-Zip:	ORLANDO FL 32804

Title	TREASURER
Name	SMITH, DANIEL
Address	741 W. COLONIAL DR.
City-State-Zip:	ORLANDO FL 32804

Title	PRESIDENT
Name	JACKSON, STEPHEN
Address	741 W COLONIAL DR
City-State-Zip:	ORLANDO FL 32804

Title	BM
Name	ORTIZ, ROBERTO DR.
Address	741 W COLONIAL DR
City-State-Zip:	ORLANDO FL 32810

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 NORTON**EXECUTIVE DIRECTOR**

02/10/2016

Electronic Signature of Signing Officer/Director Detail

Date