

**2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000001103

**FILED**  
**Jan 12, 2015**  
**Secretary of State**  
**CC9859302814**

**Entity Name:** THAT OTHERS MAY LIVE FOUNDATION CORP

**Current Principal Place of Business:**

648 ANCHORS ST.  
UNIT 3B  
FT. WALTON BCH, FL 32548

**Current Mailing Address:**

648 ANCHORS ST.  
UNIT 3B  
FT. WALTON BCH, FL 32548

**FEI Number: 88-0487308**

**Certificate of Status Desired: Yes**

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

SPEARS, RAY C  
305 GREY FOX CIRCLE  
CRESTVIEW, FL 32536 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 C  
Name AGIN, MICHAEL S  
Address 648 ANCHORS ST., UNIT 3B  
City-State-Zip: FT. WALTON BCH FL 32548

Title VC  
Name COLBY, STEVEN T  
Address 648 ANCHORS ST.  
UNIT 3B  
City-State-Zip: FT. WALTON BCH FL 32548

Title SEC  
Name MEISTERLING, HEIDI  
Address 9587 E. BABER LANE  
City-State-Zip: TUCSON AZ 85747

Title T  
Name FORD, BOB  
Address 3125 IRONHORSE DRIVE  
City-State-Zip: WOODBRIDGE VA 22192

*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: BOB. FORD**

**TREASURER**

**01/12/2015**

Electronic Signature of Signing Officer/Director Detail

Date