

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731514

FILED  
Feb 07, 2010  
Secretary of State

**Entity Name:** SCIENCE OF MIND LIGHT CENTER, INC.

**Current Principal Place of Business:**

101 ANSIN BLVD  
(HOTEL LOBBY)  
HALLANDALE, FL 33009 US

**New Principal Place of Business:**

**Current Mailing Address:**

919 HILLCREST DR  
#615  
HOLLYWOOD, FL 33021 US

**New Mailing Address:**

**FEI Number:** 59-1570956

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEVENS, ALMA RSCF  
919 HILLCREST DRIVE, #615  
HOLLYWOOD, FL 33021 US

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

STEVENS, ALMA RSCF  
919 HILLCREST DRIVE,  
#615, BUILDING 20  
HOLLYWOOD, FL 33021 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: REV. DR. ALMA MARIE STEVENS

02/07/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T  
Name: JACKSON, JUDY  
Address: 800 NE 195TH STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33186

Title: S  
Name: EATON, MYA  
Address: 4404 SW 70 TERRACE  
City-St-Zip: DAVIE, FL 33314

Title: T  
Name: JOHNSON, GAYLE E  
Address: 1943 NE 6TH COURT T201  
City-St-Zip: FT. LAUDERDALE, FL 34950

Title: PT  
Name: ALMA M STEVENS  
Address: 919 HILLCREST DRIVE, #615  
City-St-Zip: HOLLYWOOD, FL

Title: T  
Name: BRANNOCK, RUDD  
Address: 17410 NW 27TH AVENUE  
City-St-Zip: MIAMI, FL 33056

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: REV. DR. ALMA MARIE STEVENS

DR.

02/07/2010

Electronic Signature of Signing Officer or Director

Date