

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008246

FILED
Apr 12, 2009
Secretary of State

Entity Name: SPIRITIST UNION LOVE, FAITH, HOPE AND CHARITY, INC.

Current Principal Place of Business:

126 SW 57TH AVENUE
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 558092
MIAMI, FL 332558042

New Mailing Address:

FEI Number: 65-1155507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIO, TERESA
14281 SW 37TH STREET
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RIO, TERESA
Address: 14281 SW 37TH STREET
City-St-Zip: MIAMI, FL 33175

Title: VPD () Delete
Name: GORE, CELIA C
Address: 921 JEFFERSON AVE APT 46
City-St-Zip: MIAMI, FL 33134

Title: SD () Delete
Name: ROMAGUERA, OLGA A
Address: 232 N.W. 58TH COURT
City-St-Zip: MIAMI, FL 33126

Title: VSD () Delete
Name: TORRES, LIZETTE C
Address: 13851 SW 84TH STREET
City-St-Zip: MIAMI, FL 33183

Title: TD () Delete
Name: URBAY, EDITH
Address: 410 NW 136TH STREET
City-St-Zip: MIAMI, FL 33168

Title: VTD () Delete
Name: LEWIS, ROGELIA
Address: 14037 SW 66TH LANE
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: OLGA A. ROMAGUERA

SD

04/12/2009

Electronic Signature of Signing Officer or Director

Date