

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007464

FILED  
Apr 02, 2011  
Secretary of State

**Entity Name:** WAY OF LIFE MESSAGE CENTER & TRAINING INSTITUTE, INC.

**Current Principal Place of Business:**

4600 NW 9TH COURT  
4-7  
PLANTATION, FL 33317

**New Principal Place of Business:**

7228 CHESAPEAKE CIRCLE  
BOYNTON BEACH, FL 33436

**Current Mailing Address:**

4600 NW 9TH COURT  
4-7  
PLANTATION, FL 33317

**New Mailing Address:**

7228 CHESAPEAKE CIRCLE  
BOYNTON BEACH, FL 33436

**FEI Number:** 54-1884615

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KASEY-MCCLENDON, MIKE & TERESA PASTORS  
7228 CHESAPEAKE CIRCLE  
BOYNTON BEACH, FL 33436 US

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

KASEY-MCCLENDON, MIKE & TERESA DRS.  
7228 CHESAPEAKE CIRCLE  
BOYNTON BEACH, FL 33436 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: DR. TERESA C MCCLENDON

04/02/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MCCLENDON, MIKE & TERESA DRS.  
Address: 7228 CHESAPEAKE CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: T  
Name: NIKENSON, SAVOIX  
Address: 7228 CHESAPEAKE CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: T  
Name: PERSAD, POLLY  
Address: 7696 SW 7TH ST  
City-St-Zip: N. LAUDERDALE, FL 33068

Title: S  
Name: ROBERTS, CHANITA  
Address: 9873 LAWRENCE APT G-103  
City-St-Zip: BOYNTON, FL 33436

Title: MRS  
Name: MCCLENDON, KRISTINE E  
Address: 2151 NW 82ND TERRACE  
City-St-Zip: SUNRISE, FL 33322 US

Title: MRS  
Name: HUMPHREY, VANIA DEPASSE  
Address: 510 ST. MICHELLE WAY  
City-St-Zip: MARGATE, FL 33068 US

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: TERESA C. MCCLENDON

DR

04/02/2011

Electronic Signature of Signing Officer or Director

Date