

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 27, 2004 8:00 am
Secretary of State

04-07-2004 90051 049 ****70.00

DOCUMENT # N03000005700 --	
1. Entity Name BETTER LIFE MINISTRIES, INC.	

Principal Place of Business 14700 BOOKER T WASHINGTON BLVD, #516 MIAMI FL 33176	Mailing Address 14700 BOOKER T WASHINGTON BLVD, #516 MIAMI FL 33176
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00413074



MOORE CR2E037 (11/03)

2. Principal Place of Business 11001 SW 184 th ST Suite, Apt. #, etc.	3. Mailing Address 20110 SW 106 Ave. Suite, Apt. #, etc.
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City & State MIAMI, FLORIDA	City & State MIAMI, FLORIDA
Zip 33157	Zip 33189
Country U.S.A.	Country U.S.A.

4. FEI Number	Applied For ☒ Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CONNOR, HUGH REV DR 14700 BOOKER T WASHINGTON BLVD, #516 MIAMI FL 33176	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '0	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CONNOR, HUGH REV DR 14700 BOOKER T WASHINGTON BLVD, #516 MIAMI FL 33176 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	C PROCTOR, AVIS 3197 TURTLE COVE WEST PALM BEACH ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V CONNOR, YVONNE 14700 BOOKER T WASHINGTON BLVD, #516 MIAMI FL 33176 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T FELL, TREVOR 1731 NW 186 STREET MIAMI FLORIDA 33056 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CONNOR, RECHELLE 14700 BOOKER T WASHINGTON BLVD, #516 MIAMI FL 33176 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	M GRANT, ARLENE 14965 DUNBAR MIAMI FLORIDA 33176 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MILLER, THELMA 15341 SW 106 Ave. MIAMI FLORIDA 33157 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S/T CONNOR, RECHELLE 14700 BOOKER T WASHINGTON BLVD, #516 MIAMI FL 33176 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HUGH CONNOR

03/25/04

Daytime Phone #