

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002429

FILED  
Jan 15, 2012  
Secretary of State

**Entity Name:** SPIRITIST CENTER LOVE AND CHARITY, INC.

**Current Principal Place of Business:**

7901 KINGSPORTE PKWY  
SUITE 13  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

7901 KINGSPORTE PKWY  
SUITE 13  
ORLANDO, FL 32819

**New Mailing Address:**

**FEI Number:** 20-4643632

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SOUZA, RENATA  
5412 BAYBROOK AVE  
ORLANDO, FL 32819 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: P  
Name: NEVES, ELIZETE  
Address: 8624 VALLEY RIDGE CT  
City-St-Zip: ORLANDO, FL 32818

Title: T  
Name: NEVES, MOACYR  
Address: 8624 VALLEY RIDGE CT  
City-St-Zip: ORLANDO, FL 32818

Title: S  
Name: PEREIRA, PRISCILA  
Address: 8624 VALLEY RIDGE CT  
City-St-Zip: ORLANDO, FL 32818

Title: D  
Name: SOUZA, RENATA  
Address: 5412 BAYBROOK AVE  
City-St-Zip: ORLANDO, FL 32819

Title: D  
Name: MACHADO, LUCIA  
Address: 14561 CABLESHIRE WAY  
City-St-Zip: ORLANDO, FL 32824

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:** ELIZETE NEVES

P

01/15/2012

Electronic Signature of Signing Officer or Director

Date