

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011889

FILED  
Sep 03, 2008  
Secretary of State

**Entity Name:** MORE TO LIFE MINISTRIES, INC.

**Current Principal Place of Business:**

8681 BOCA DRIVE  
BOCA RATON, FL 334331867 US

**New Principal Place of Business:**

**Current Mailing Address:**

8681 BOCA DRIVE  
BOCA RATON, FL 334331867 US

**New Mailing Address:**

**FEI Number:** 20-5874756      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

MCLAREN, MEGAN M REV  
8681 BOCA DRIVE  
BOCA RATON, FL 334331867 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCLAREN, MEGAN M REV.  
Address: 8681 BOCA DRIVE  
City-St-Zip: BOCA RATON, FL 334331867 US

Title: VP ( ) Delete  
Name: MCLAREN, ROSLYN S  
Address: 1301 NW 12TH AVENUE, #313  
City-St-Zip: BOCA RATON, FL 334860000 US

Title: SEC. ( ) Delete  
Name: JOHNSON, ELAINE M  
Address: 21218 ST. ANDREWS BLVD, #153  
City-St-Zip: BOCA RATON, FL 334332448 US

Title: TRES ( ) Delete  
Name: POWELL, MARCIA D  
Address: 5141 MAGELLAN WAY EAST  
City-St-Zip: DELRAY BEACH, FL 334841375 US

**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:

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: REV. MEGAN MCLAREN

PRES

09/03/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date