

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000006149

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** GLIMMER OF LIFE FOUNDATION INC.

**Current Principal Place of Business:**

9003 TAFT ST.  
PEMBROKE PINES, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

9003 TAFT ST.  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

**FEI Number:** 26-1377567

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BONFINI, ELEONORA  
7591 SW 32 COURT  
DAVIE, FL 33314 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  
**Name:** BONFINI, ELEONORA  
**Address:** 7591 SW 32ND CT  
**City-St-Zip:** DAVIE, FL 33314

**Title:** SD  
**Name:** VERMUT, LAURIE  
**Address:** 8005 NW 10 COURT  
**City-St-Zip:** PLANTATION, FL 33322

**Title:** TD  
**Name:** PIRO, DONNA  
**Address:** 7591 SW 32ND CT  
**City-St-Zip:** DAVIE, FL 33314

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:** ELEONORA BONFINI

OWNE

04/27/2011

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

\_\_\_\_\_  
Date