

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008007

**FILED**  
**Feb 12, 2010**  
**Secretary of State**

**Entity Name:** THE CHURCH OF THE RESURRECTION AND THE LIFE INC.

**Current Principal Place of Business:**

5742 NW 2ND AVENUE  
MIAMI, FL 33127

**New Principal Place of Business:**

10325 NW 2ND CT  
MIAMI, FL 33150

**Current Mailing Address:**

10325 NWN 2ND CT.  
MIAMI, FL 33150

**New Mailing Address:**

**FEI Number:** 06-1828683

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AZULPHAR, MARIE C  
10325 NW 2ND CT  
MIAMI, FL 33150 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: AZULPHAR, MARIE C  
Address: 10325 NW 2ND CT  
City-St-Zip: MIAMI, FL 33150

Title: SD  
Name: PIERRE, ANNA C  
Address: 151 N.W 85TH ST  
City-St-Zip: MIAMI, FL 33150

Title: TD  
Name: TIFFANY, AZULPHAR  
Address: 10335 NW 2ND CT  
City-St-Zip: MIAMI, FL 33150

Title: D  
Name: BRYANT, LOUIS B  
Address: 7351 GRANDVIEW BLVD  
City-St-Zip: MIRAMAR, FL 33023

Title: D  
Name: HINES, SHANNON R  
Address: 2220 SERVICE RD  
City-St-Zip: OPA LOCKA, FL 33054

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: MARIE C. AZULPHAR

PD

02/12/2010

Electronic Signature of Signing Officer or Director

Date