2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003937

Apr 30, 2010 Secretary of State

Entity Name: DIVINE CIRCLE OF LIGHT "CORP"

Current Principal Place of Business: New Principal Place of Business:

518 JOEL BLVD

LEHIGH ACRES, FL 33936 US

Current Mailing Address: New Mailing Address:

518 JOEL BLVD

LEHIGH ACRES, FL 33936 US

FEI Number: 42-1765668 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SLATER, LUREEN REV. 706 HAMILTON AVENUE LEHIGH ACRES EL 33972

LEHIGH ACRES, FL 33972 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: PCEC

Name: SLATER, LUREEN REV.
Address: 706 HAMILTON AVENUE
City-St-Zip: LEHIGH ACRES, FL 33972 US

Title: VP

 Name:
 SLATER, PAUL MR.

 Address:
 706 HAMILTON AVENUE

 City-St-Zip:
 LEHIGH ACRES, FL 33972 US

Title: C

Name: CICERO, ALTHEA MRS. Address: 644 EAST 88 STREET City-St-Zip: BROOKLYN,, NY 11236

Title: MGRM

Name: ZARA, EVANS MRS.
Address: 720 HAMILTON AVENUE
City-St-Zip: LEHIGH ACRES, FL 33972

Title: 5

Name: FOSTER, AUDREY MRS.
Address: 207 ANDULUCIA AVENUE, S.
City-St-Zip: LEHIGH ACRES, FL 33974

Title:

Name: PACQUETTE, ELEISE MS.
Address: 13 LEELAND HEIGHTS BLVD. S.
City-St-Zip: LEHIGH ACRES, FL 33972

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: LUREEN SLATER REV 04/30/2010