

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44154

FILED
Apr 09, 2009
Secretary of State

Entity Name: SPIRIT OF LIFE MINISTRIES OF FORT LAUDERDALE, INC.

Current Principal Place of Business:

27 W HALLANDALE BEACH BLVD
HALLANDALE, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

5360 SW 145TH AVENUE
FT. LAUDERDALE, FL 33330

New Mailing Address:

FEI Number: 65-0278402 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CLARK, JONAS A. III
5360 SW 145TH AVENUE
SOUTHWEST RANCHES, FL 33330 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: D () Delete
Name: BAKER, ELVERA
Address: 1300 NW 2ND AVE #8
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: WHEELock, NATASHA
Address: 2200 SALERNO CIRCLE
City-St-Zip: WESTON, FL 33311

Title: D () Delete
Name: CLARK, RHONDA M
Address: 5360 SW 145TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33330

Title: D () Delete
Name: CLARK, JONAS
Address: 5360 SW 145TH AVENUE
City-St-Zip: SOUTHWEST RANCHES, FL 33330

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BAKER, ELVERA
Address: 808 NW 20TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D (X) Change () Addition
Name: WHEELock, NATASHA
Address: 1070 BRIAR RIDGE ROAD
City-St-Zip: WESTON, FL 33327

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: MADON, MELANIE
Address: 1422 FLETCHER STREET
City-St-Zip: HOLLYWOOD, FL 33020

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: JONAS A. CLARK III

PRES

04/09/2009

Electronic Signature of Signing Officer or Director

Date