

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

DOCUMENT# N44154

**FILED**  
**Jan 26, 2011**  
**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 ( )**

**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  
Name: BAKER, ELVERA  
Address: 808 NW 20TH AVE.  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D  
Name: WHEELLOCK, NATASHA  
Address: 1070 BRIAR RIDGE ROAD  
City-St-Zip: WESTON, FL 33327

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

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

Title: D  
Name: MADON, MELANIE  
Address: 1422 FLETCHER STREET  
City-St-Zip: HOLLYWOOD, FL 33020

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: JONAS CLARK

PRES

01/26/2011

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

\_\_\_\_\_  
Date