#### 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 714764** 

Entity Name: SALVATION, HEALING AND MIRACLE CENTER, INC.

FILED Feb 20, 2014 Secretary of State CC7657837228

# **Current Principal Place of Business:**

440 BARBARA JENKINS ST COCOA, FL 32922

### **Current Mailing Address:**

P.O. BOX 658

COCOA. FL 32923-0658 US

FEI Number: 23-7227512 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

SMITH, LURLINE 1034 REVILLA LN ROCKLEDGE, FL 32955 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

#### Officer/Director Detail:

Title PTD Title DS

NameSMITH, LURLINENamePOOL, SONJA YAddress1034 REVILLA LANEAddress996 DERMERAT DR.City-State-Zip:ROCKLEDGE FL 32955City-State-Zip:ROCKLEDGE FL 32955

Title D

Name RANDALL, ROBERT

Address 501 A LANE

City-State-Zip: COCOA FL 32923

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: LURLINE SMITH

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

02/20/2014

Date