

**2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N04000002043

**Entity Name:** MIRACLE TEMPLE OF LIFE CHANGING MINISTRIES, INC.

**Current Principal Place of Business:**

C/O LORAIN A. DAISE  
6736 GASPAS CIRCLE WESG  
JACKSONVILLE, FL 32219

**Current Mailing Address:**

C/O LORAIN A. DAISE  
6736 GASPAS CIRCLE WESG  
JACKSONVILLE, FL 32219

**FEI Number:** 20-0420886

**Certificate of Status Desired:** Yes

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

DAISE, LORAIN A  
6736 GASPAS CIRCLE WEST  
JACKSONVILLE, FL 32219 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 DP  
Name DAISE, LORAIN A  
Address 6736 GASPAS CIRCLE WEST  
City-State-Zip: JACKSONVILLE FL 32219

Title DS  
Name NOISETTE, SHERLYN  
Address 3148 SEARCH WOOD DR  
City-State-Zip: JACKSONVILLE FL 32277

Title DT  
Name HARRELL, ROBERT  
Address 6736 GASPAS CIRCLE W.  
City-State-Zip: JACKSONVILLE FL 32219

*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:** LORAIN DAISE

DP

12/05/2014

Electronic Signature of Signing Officer/Director Detail

Date