

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000008007

**Entity Name:** THE CHURCH OF THE RESURRECTION AND THE LIFE INC.

**FILED**  
**Apr 14, 2016**  
**Secretary of State**  
**CC2364672464**

**Current Principal Place of Business:**

10325 NW 2ND CT  
MIAMI, FL 33150

**Current Mailing Address:**

10325 NW 2ND CT  
MIAMI, FL 33150

**FEI Number: 06-1828683**

**Certificate of Status Desired: Yes**

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

AZULPHAR, MARIE C  
10325 NW 2ND CT  
MIAMI, FL 33150 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 PD  
Name AZULPHAR, MARIE C  
Address 10325 NW 2ND CT  
City-State-Zip: MIAMI FL 33150

Title SD  
Name PIERRE, ANNA C  
Address 151 N.W 85TH ST  
City-State-Zip: MIAMI FL 33150

Title TD  
Name TIFFANY, AZULPHAR  
Address 10335 NW 2ND CT  
City-State-Zip: MIAMI FL 33150

Title D  
Name BRYANT, LOUIS B  
Address 7351 GRANDVIEW BLVD  
City-State-Zip: MIRAMAR FL 33023

Title D  
Name MCCRAY-MOSS, KERVIN A  
Address 2311 NW 91ST  
City-State-Zip: MIAMI FL 33147

*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: TIFFANY AZULPHAR**

**TD**

**04/14/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date