

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000003740

**Entity Name:** LMC INTERFAITH MINISTRIES, INC.

**Current Principal Place of Business:**

4604 NW 49TH ST  
TAMARAC, FL 33319

**Current Mailing Address:**

4604 NW 49TH ST  
TAMARAC, FL 33319 US

**FEI Number:** 80-0175869

**Certificate of Status Desired:** No

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

CARDONA, LORI DR.  
4604 NW 49TH STREET  
TAMARAC, FL 33319 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 D  
Name CARDONA, LORI DR.  
Address 4604 NW 49TH STREET  
City-State-Zip: TAMARAC FL 33319

Title S  
Name ROMERO, ROSEMARY  
Address 4604 NW 49TH STREET  
City-State-Zip: TAMARAC FL 33319

Title T  
Name CAVE, ANNETTE M  
Address 4604 NW 49TH STREET  
City-State-Zip: TAMARAC FL 33319

*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:** LORI CARDONA

**DIRECTOR**

**04/07/2015**

Electronic Signature of Signing Officer/Director Detail

Date