

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

DOCUMENT# N11000000072

**FILED**  
**May 01, 2014**  
**Secretary of State**  
**CC9929868822**

**Entity Name:** ANGEL OF LOVE LIFE CENTER OF HOPE INC.

**Current Principal Place of Business:**

7636 GRANDVIEW BLVD.  
MIRAMAR, FL 33023

**Current Mailing Address:**

7636 GRANDVIEW BLVD.  
MIRAMAR, FL 33023

**FEI Number:** 27-5488700

**Certificate of Status Desired:** No

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

SOREY, FRANCINA B  
7636 GRANDVIEW BLVD.  
MIRAMAR, FL 33023 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 OWNER/PRESIDENT/DIRECTOR  
Name SOREY, FRANCINA B  
Address 7636 GRANDVIEW BLVD  
City-State-Zip: MIRAMAR FL 33023

Title VP  
Name SOREY, DONALD JR  
Address 1027 NW 75 ST  
City-State-Zip: MIAMI FL 33127

Title BM  
Name PINDER, RODNEY SR.  
Address 31 NW 189 STREET  
City-State-Zip: MIAMI GARDENS FL 33316

Title BM  
Name COLEBROOK-GREEN, APRIL  
Address 1421 NW 70TH ST.  
City-State-Zip: MIAMI FL 33147

Title TREASURER  
Name CHARSWELL, INDIRA  
Address 675 NW 56 STREET  
City-State-Zip: MIAMI FL 33127

Title S  
Name BELL, MICHELLE Y  
Address 1027 NW75 ST.  
City-State-Zip: MIAMI FL

Title ASSISTANT DIRECTOR  
Name SOREY, OTTO R  
Address 7636 GRANDVIEW BLVD  
City-State-Zip: MIRAMAR FL 33023

*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:** FRANCINA B. SOREY

**OWNER/PRES/DIR**

**05/01/2014**

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

\_\_\_\_\_  
Date