

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004158

Entity Name: THE POWER OF LIFE, INC.

Current Principal Place of Business:

10755 PARK BLVD. N
SUITE B
SEMINOLE, FL 33772

FILED
Feb 26, 2015
Secretary of State
CC0207561595

Current Mailing Address:

P.O. BOX 47069
ST.PETERSBURG, FL 33743 US

FEI Number: 45-1287660

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MALTI, JOSSETTE S
10755 PARK BLVD. N
SUITE B
SEMINOLE, FL 33772 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, PRESIDENT
Name FASTJE, KAREN
Address 474 41ST AVENUE N
City-State-Zip: ST. PETERSBURG FL 33703

Title SD
Name MALTI-BARBER, KATHIE J
Address 914 10TH AVE SW
City-State-Zip: LARGO FL 33770

Title DIRECTOR
Name TENEYCK, DAVID
Address P.O. BOX 47069
City-State-Zip: ST.PETERSBURG FL 33743

Title DIRECTOR
Name EDGHILL, KENAYA
Address P.O. BOX 47069
City-State-Zip: ST.PETERSBURG FL 33743

Title DIRECTOR
Name ROSSO, JOHN
Address P.O. BOX 47069
City-State-Zip: ST.PETERSBURG FL 33743

Title TREASURER
Name MALTI, JOSSETTE
Address P.O. BOX 47069
City-State-Zip: ST.PETERSBURG FL 33743

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: KATHIE J MALTI-BARBER

DIRECTOR / SECRETARY 02/26/2015

Electronic Signature of Signing Officer/Director Detail

Date