

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000006259

Entity Name: PARENTING WITH A PURPOSE LIFE CENTER INC.

Current Principal Place of Business:

6625 MIAMI LAKES DRIVE, STE. 217
MIAMI LAKES, FL 33014

Current Mailing Address:

6625 MIAMI LAKES DRIVE, STE. 217
MIAMI LAKES, FL 33014 US

FEI Number: 46-3503992

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, JOANN R
6625 MIAMI LAKES DRIVE, STE. 217
MIAMI LAKES, FL 33014 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 SMITH, JOANN R
Address 6625 MIAMI LAKES DRIVE, STE. 217
City-State-Zip: MIAMI LAKES FL 33014

Title VPD
Name SMITH, JONATHAN
Address 6625 MIAMI LAKES DRIVE, STE. 217
City-State-Zip: MIAMI LAKES FL 33014

Title D
Name BRAGGS, MARCELL
Address 6625 MIAMI LAKES DRIVE, STE. 217
City-State-Zip: MIAMI LAKES FL 33014

Title D
Name PIERRE, MARJORIE
Address 6625 MIAMI LAKES DRIVE, STE. 217
City-State-Zip: MIAMI LAKES FL 33014

Title D
Name CARGILL, DARLENE
Address 6625 MIAMI LAKES DRIVE, STE. 217
City-State-Zip: MIAMI LAKES FL 33014

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: JOANN SMITH

PRESIDENT

04/30/2025

Electronic Signature of Signing Officer/Director Detail

Date