2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000474

Entity Name: CHRISTIAN LIFE RESTORATION CENTER, INC.

FILED Apr 11, 2023 Secretary of State 6270753584CC

Current Principal Place of Business:

3301 N. HIATUS ROAD SUNRISE, FL 33351

Current Mailing Address:

P.O. BOX 450964

SUNRISE, FL 33345 US

FEI Number: 65-0372032 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FABRE, YOLETTE 3301 N. HIATUS ROAD SUNRISE, FL 33351 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PD Title VP, S

NameFABRE, YOLETTENameFABRE JR., GEORGEAddress6101 LOQUAT CIRCLEAddress6101 LOQUAT CIRCLECity-State-Zip:TAMARAC FL 33319City-State-Zip:TAMARAC FL 33319

Title TD Title D

Name TELLUS, VERNANTE Name NOEL, KETIA

Address 7573 W OAKLAND PARK BLVD Address 7573 W. OAKLAND PARK BLVD

City-State-Zip: LAUDERHILL FL 33319 City-State-Zip: LAUDERHILL FL 33319

Title D Title D

NameFABRE, SABINENameFABRE, TRACY J.Address6101 LOQUAT CIRCLEAddress6101 LOQUAT CIRCLECity-State-Zip:TAMARAC FL 33319City-State-Zip: TAMARAC FL 33319

Title DIRECTOR Title DIRECTOR

NameFABRE, NATHANIELENamePAUL, SANDHERSAddress6101 LOQUAT CIRCLEAddress5971 NW 17 PLACE
#202

TAMARAC FL 33319 City State Zing St

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.

City-State-Zip:

SIGNATURE: KETIA NOEL DIRECTOR 04/11/2023

SUNRISE FL 33313