

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

DOCUMENT# N08000011124

**Entity Name:** RABBI LOVE INTERNATIONAL MINISTRY INC.

**Current Principal Place of Business:**

318 NE 17TH PL  
CAPE CORAL, FL 33909

**Current Mailing Address:**

318 NE 17TH PL  
CAPE CORAL, FL 33909

**FEI Number:** 30-0554921

**Certificate of Status Desired:** No

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

MORISSEAU, MARIE F  
318 NE 17TH PL  
CAPE CORAL, FL 33909 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 P  
Name MORISSEAU, MARIE F  
Address 318 NE 17TH PL  
City-State-Zip: CAPE CORAL FL 33909

Title VP  
Name JOHN, CLAUDETTE  
Address 18208 SWEET  
City-State-Zip: CAPE CORAL FL 33909

Title S  
Name JOSEPH, EMMANUEL E  
Address 3216 15TH ST SW  
City-State-Zip: LEHIGH ACRES, FL 33976

Title T  
Name JEANNE, HOVING D  
Address 3804 12 ST WEST  
City-State-Zip: LEIHT FL 33971

Title C  
Name JEANINE, SENAT  
Address 1705 SOUTH DRIVE  
City-State-Zip: FORT MYERS FL 33907

*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:** MORISSEAU, MARIE F

**PRESIDENT**

**12/30/2014**

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

\_\_\_\_\_  
Date