

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008235

FILED
Feb 12, 2007
Secretary of State

Entity Name: UNITY OF LOVE FELLOWSHIP MINISTRY, INC.

Current Principal Place of Business:

1897 PALM BEACH LAKES BLVD.
204/203
W PALM BCH, FL 33409

New Principal Place of Business:

1897 PALM BEACH LAKES BLVD.
204
W PALM BCH, FL 33409

Current Mailing Address:

6170 SHERWOOD GLEN WAY
#1
WEST PALM BEACH, FL 33415

New Mailing Address:

FEI Number: 65-1156706 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TIPTON, TOMMY
501 S CONGRESS AVE
W PALM BCH, FL 33409 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: TIPTON, TOMMY SR
Address: 501 S CONGRESS AVE
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: DV () Delete
Name: ELLIOTT, HAROLD
Address: 4985 PINECONE LANE
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: S () Delete
Name: MOMENT, LAVERNE
Address: 4951 HAVERHILL COMMONS CIR. APT. 21
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: DT (X) Delete
Name: JOINER, SHARON M
Address: 501 S CONGRESS AVE
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: D (X) Delete
Name: MARCELLE-CONEY, DEBRA
Address: 5832 CORSON PLACE
City-St-Zip: LANTANA, FL US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TIPTON, TOMMY
Address: 501 S CONGRESS AVE
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: S (X) Change () Addition
Name: JOINER, SHARON
Address: 501 S CONGRESS AVE
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: T (X) Change () Addition
Name: TIPTON, TOMMY
Address: 501 CONGRESS AVE
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TOMMY TIPTON

P

02/12/2007

Electronic Signature of Signing Officer or Director

Date