

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008235

FILED  
May 01, 2008  
Secretary of State

Entity Name: UNITY OF LOVE FELLOWSHIP MINISTRY, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**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)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**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:**

TIPTON SR, TOMMY  
6170 SHERWOOD GLEN WAY#1  
W PALM BCH, FL 33409      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: TOMMY TIPTON SR

05/01/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

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

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: TIPTON SR, TOMMY  
Address: 6170 SHERWOOD GLEN WAY#1  
City-St-Zip: WEST PALM BEACH, FL 33415 US

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

Title: T      (X) Change ( ) Addition  
Name: TIPTON SR, TOMMY  
Address: 6170 SHERWOOD GLEN WAY#1  
City-St-Zip: WEST PALM BEACH, FL 33415 US

I hereby certify that the information supplied with this filing does not qualify 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 SR

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date