

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007762

FILED  
Feb 16, 2011  
Secretary of State

Entity Name: INFINITE LOVE MINISTRIES, INC.

**Current Principal Place of Business:**

981 AUBURN AVENUE  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 684  
MINNEOLA, FL 34755

**New Mailing Address:**

FEI Number: 27-0720799

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

FORD, DAWN B  
981 AUBURN AVENUE  
CLERMONT, FL 34711 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: P  
Name: FORD, DEAN W  
Address: 981 AUBURN AVENUE  
City-St-Zip: CLERMONT, FL 34711

Title: VP  
Name: FORD, DAWN B  
Address: 981 AUBURN AVENUE  
City-St-Zip: CLERMONT, FL 34711

Title: DIR  
Name: FORD, DAWN B  
Address: 981 AUBURN AVE.  
City-St-Zip: CLERMONT, FL 34711

Title: DIR  
Name: MACDONELL, BARBARA  
Address: PO BOX 120831  
City-St-Zip: CLERMONT, FL 34712

Title: DIR  
Name: FORD, DEAN W  
Address: 981 AUBURN AVE.  
City-St-Zip: CLERMONT, FL 34711

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: DAWN B. FORD

VP

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date