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# NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000006546

1. Entity Name  
Truth in Love Ministry, Inc.



FILED  
05 MAR -1 PM 2:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
909 Streamlet Ave.  
Suite, Apt. #, etc.

3. Mailing Address  
909 Streamlet Ave.  
Suite, Apt. #, etc.

2005 ANNUAL REPORT

City & State  
Sebastian, FL

City & State  
Sebastian, FL

Zip  
32958

Country  
U.S.A.

Zip  
32958

Country  
U.S.A.

4. FEI Number  
65-0716182

Applied For  
 Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of <sup>NEW</sup> Current Registered Agent

Name  
Ms. Dolores Arend

Street Address (P.O. Box Number is Not Acceptable)  
909 Streamlet Ave.

City  
Sebastian

FL

Zip Code  
32958

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Dolores Arend* **DOLORES AREND** 2-15-2005

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FEE IS \$61.25**  
Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FARAG, NASSEAR S. DELTA LAKE RESORT, LOT 79 MONTE ALTO, TX 78538	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200048830862 03/22/05--01008--022 **61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FARAG, MARILYN S. DELTA LAKE RESORT, LOT 79 MONTE ALTO, TX 78538	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TODD, KENNETH 27843 Dilworth Rd. Harlingen, TX 78552	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JUWA L. TODD 822 E. BUCHANAN HARLINGEN, TX 78550	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAMES L. PRATT 1210 White Wing Dr. HARLINGEN, TX 78550	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	*D WILLETTE E. PARKER 18 S. AZTEC COVE DR. LOS FRESNOS, TX 78566	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Marilyn S. Farag Sec/Treas.* **MARILYN S. FARAG** 2-22-2005 956-262-1649

CR2E037B (12/02)

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10.

Additional Directors

D  
PRATT, ANTONIA G.  
1210 WHITE WING DR.  
HARLINGEN, TX 78550