2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003755

Entity Name: MIRACLE OF LOVE, INC.

FILED Apr 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1800 MERCY DRIVE SUITE 300 ORLANDO, FL 32808 US **New Mailing Address: Current Mailing Address:** 1800 MERCY DRIVE SUITE 300 ORLANDO, FL 32808 US FEI Number: 59-3455949 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NORTON-GUERRERO, NICOLA D 7641 HARBOR BEND CIRCLE ORLANDO, FL 32822 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete NORTON-GUERRERO, NICOLA D NORTON-GUERRERO, NICOLA D Name: Name: 7641 HARBOR BEND COURT Address: 1800 MERCY DRIVE Address: ORLANDO, FL 32808 City-St-Zip: ORLANDO, FL 32822 City-St-Zip: Title: Title: **PRES** (X) Change () Addition () Delete JONES, OTHA Name: JONES, OTHA Name: Address: 11945 RED BRIDGE RD Address: 11945 RED BRIDGE RD City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32824 Title: () Delete Title: () Change () Addition MUNROE, ALELIA Name: Name: 316 QUEENS GATE ROAD Address: Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: () Delete Title: SEC Title: () Change () Addition Name: NALL, TYNICA Name: 4490 KIRKWOOD BLVD Address: Address: City-St-Zip: ORLANDO, FL 32811 City-St-Zip: Title: () Delete Title: () Change () Addition SARRA, IDEHEN Name: Name: 5869 TALAVERA ST. Address: Address: City-St-Zip: ORLANDO, FL 32807 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: NICOLA NORTON-GUERRERO ED 04/25/2006