

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N50673

FILED
May 09, 2003
Secretary of State

Entity Name: LOVE COVENANT WORD CHURCH INC.

Current Principal Place of Business:

661 W LANCASTER ROAD
ORLANDO, FL 32809 US

New Principal Place of Business:

Current Mailing Address:

661 W LANCASTER ROAD
ORLANDO, FL 32809 US

New Mailing Address:

FEI Number: 59-3137206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LLOYD, ANDREW DR
3109 S SEMORAN BLVD, #89
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

LLOYD, ANDREW DR
9015 TAVOLINI TERRACE
WINDERMERE, FL 34786 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:

05/09/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOYD, ANDREW R
Address: 3109 S. SEMORAN BLVD., #89
City-St-Zip: ORLANDO, FL 32822

Title: TD () Delete
Name: LOYD, MARY ANN
Address: 3109 S. SEMORAN BLVD., #89
City-St-Zip: ORLANDO, FL 32822

Title: SD () Delete
Name: PITTMAN, MAXIE M.
Address: 4565 KIRKLAND BLVD.
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOYD, ANDREW R
Address: 9015 TAVOLINI TERRACE
City-St-Zip: WINDERMERE, FL 34786 US

Title: TD (X) Change () Addition
Name: LOYD, MARY ANN
Address: 9015 TAVOLINI TERRACE
City-St-Zip: WINDERMERE, FL 34786

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 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 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: ANDREW R. LOYD

PD

05/09/2003

Electronic Signature of Signing Officer or Director

Date