

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000008633

**Entity Name:** AMBASSADORS OF LOVE, INC.**Current Principal Place of Business:**18 PAGE COURT  
TRAVELERS REST, SC 29690**Current Mailing Address:**18 PAGE COURT  
TRAVELERS REST, SC 29690 US**FEI Number:** 46-1015171**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PASSWATERS, DONALD  
15161 SW 42 TERRACE  
MIAMI, FL 33185 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	P/D
Name	PASSWATERS, DONALD
Address	18 PAGE COURT
City-State-Zip:	TRAVELERS REST SC 29690

Title	S/D
Name	PRICE, DONNA
Address	192 E. FARRELL DRIVE
City-State-Zip:	WOODRUFF SC 29388

Title	D
Name	MILLIGAN GALASSO, JADE
Address	820 MOSTELLER DRIVE
City-State-Zip:	GREER SC 29651

Title	VP/D
Name	ALVAREZ, JOSE E
Address	5725 NW 114TH PATH, UNIT 102
City-State-Zip:	DORAL FL 33175

Title	T/D
Name	PASSWATERS, MARIA
Address	18 PAGE COURT
City-State-Zip:	TRAVELERS REST SC 29690

Title	D
Name	DADLANI, LAKHI
Address	15161 SW 42 TERRACE
City-State-Zip:	MIAMI FL 33185

*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:** MARIA PASSWATERS**T/D****03/01/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date