# 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.

VP

SIGNATURE: HAROLD MCCAMBRIDGE

Electronic Signature of Signing Officer/Director Detail

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT	

#### DOCUMENT# N43483

Entity Name: LOVE OF CHRIST MINISTRIES, INC.

#### **Current Principal Place of Business:**

2223 WEKIVA VILLAGE LANE APOPKA, FL 32712

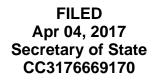
### **Current Mailing Address:**

940 CENTER CIR ALTAMONTE SPRINGS, FL 32714 US

# FEI Number: 59-3092197

# Name and Address of Current Registered Agent:

COHN, STEPHEN M CPA 940 CENTER CIRCLE #3014 ALTAMONTE SPRINGS, FL 32714 US



Certificate of Status Desired: No

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	STEPHEN M COHN			04/04/2017	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	DP	Title	D		
Name	MCCAMBRIDGE, AGATHA H	Name	MCCAMBRIDGE, HAROLD J		
Address	2223 WEKIVA VILLAGE LN.	Address	2223 WEKIVA VILLAGE LN.		
City-State-Zip:	APOPKA FL 32712	City-State-Zip:	APOPKA FL 32712		
Title	D	Title	D		
Name	CALEB, BENIDICT	Name	SACHDEVA, PAUL		
Name	CALLE, BENIDICT				
Address	705 BUSBEE AVENUE	Address	2714 WINDINGDALE DR		
City-State-Zip:	APOPKA FL 32703	City-State-Zip:	RICHMOND VA 23233		

04/04/2017

Date