

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44054

Entity Name: A BOND OF LOVE ADOPTION AGENCY, INC.**Current Principal Place of Business:**4017 SWIFT ROAD
SARASOTA, FL 34231**Current Mailing Address:**4017 SWIFT ROAD
SARASOTA, FL 34231 US**FEI Number:** 65-0307813**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STOCKHAM, SUSAN L.
6775 TIMBERLAND LANE
SARASOTA, FL 34241 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	D
Name	FABIEN, MARGARET
Address	2772 GALLEON PLACE
City-State-Zip:	SARASOTA FL 34235

Title	C
Name	HESTER, JACKIE
Address	1708 FLOWER DR
City-State-Zip:	SARASOTA FL 34239

Title	SD
Name	WINSLER, CHRISTINE
Address	7241 FIRE THORNE DR
City-State-Zip:	SARASOTA FL 34240

Title	P
Name	CAREY, ANGELA
Address	5116 ASHTON RD
City-State-Zip:	SARASOTA FL 34233

Title	D
Name	COLE, JEANETTE
Address	5637 BENEVA WOODS CIRCLE
City-State-Zip:	SARASOTA FL 34233

Title	DIRECTOR
Name	ESKEW, CURT
Address	1680 KEELY LANE
City-State-Zip:	SARASOTA FL 34232

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: ANGELA CAREY**DIRECTOR****02/21/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date