

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000003067

**Entity Name:** LOCKS OF LOVE INC.

**Current Principal Place of Business:**

234 SOUTHERN BLVD.  
WEST PALM BEACH, FL 33405

**Current Mailing Address:**

310 W. 20TH STREET  
SUITE 300  
KANSAS CITY, MO 64108

**FEI Number:** 65-0755522

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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  
Name COFFMAN, MADONNA  
Address 234 SOUTHERN BLVD.  
City-State-Zip: WEST PALM BEACH FL 33405

Title T  
Name CHRISTIAN, JILL  
Address 234 SOUTHERN BLVD.  
City-State-Zip: WEST PALM BEACH FL 33405

Title VP  
Name SHELL, DORIS  
Address 234 SOUTHERN BLVD.  
City-State-Zip: WEST PALM BEACH FL 33405

Title D  
Name LEIXNER, TIMOTHY C  
Address ONE EAST BROWARD BLVD., STE.  
1300  
City-State-Zip: FT. LAUDERDALE FL 33301

Title S  
Name BARRIE, DOROTHY  
Address 234 SOUTHERN BLVD.  
City-State-Zip: WEST PALM BEACH FL 33405

Title CFO  
Name LINDA, BORUM  
Address 234 SOUTHERN BLVD.  
City-State-Zip: WEST PALM BEACH FL 33405

*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:** LINDA BORUM

CFO

03/27/2013

Electronic Signature of Signing Officer/Director Detail

Date