

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717379

FILED  
Jan 13, 2005  
Secretary of State

**Entity Name:** FELLOWSHIP OF CHRISTIAN LOVE, INC.

**Current Principal Place of Business:**

1320 ROCK SPRINGS DRIVE  
MELBOURNE, FL 32940 US

**New Principal Place of Business:**

**Current Mailing Address:**

1320 ROCK SPRINGS DRIVE  
MELBOURNE, FL 32940 US

**New Mailing Address:**

**FEI Number:** 59-1286909

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SNYDER, THOMAS  
1320 ROCK SPRINGS DRIVE  
MELBOURNE, FL 32940 US

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

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

**OFFICERS AND DIRECTORS:**

Title: STD ( ) Delete  
Name: SNYDER, AGATHA N  
Address: 11320 ROCK SPRINGS DRIVE  
City-St-Zip: MELBOURNE, FL 32940

Title: PD ( ) Delete  
Name: SNYDER, THOMAS  
Address: 1320 ROCK SPRINGS DRIVE  
City-St-Zip: MELBOURNE, FL 32940 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: THOMAS J. SNYDER

PD

01/13/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date