### 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

## **DOCUMENT #763338**

1. Entity Name

LOVÉ AND LIFE MINISTRIES, INC.



**FILED** Feb 26, 2007 08:00 A Secretary of State

Principal Place of Business

1031 GUNKA RD

JACKSONVILLE, FL 32216

Mailing Address

1031 GUNKA RD

: JACKSONVILLE, FL 32216



01102007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 11-3742801 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CARMICHAEL, HAZEL 3144 GALLANT DR JACKSONVILLE, FL 32250

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<ol> <li>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. I am familiar with, and accept the obligations of registered agent.</li> </ol>			
SIGNAT	JRE	and site if applicable. (NOTE: Registered Agent signature required when re	nstating) DATE
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing \$5.00 M Trust Fund Contribution.  Added to F	
10.	OFFICERS AND DIRECTORS		
TITLE	PMD CARMICHAEL HAZEL		•

#### CARMICHAEL. HAZEL STREET ADDRESS 1031 GUNKA RD CITY-ST-ZIP JACKSONVILLE, FL 32216 HILE VTD CARMICHAEL, ROY NAME STREET ADDRESS 1031 GUNKA RD CITY-ST-ZIP JACKSONVILLE, FL 32216 TITLE VD NAME TOTH, JEAN STREET ADDRESS 2300 RANWILL CT CITY-ST-ZIP ORLANDO, FL 32806 TITLE NAME BLOUNT, BARBARA STREET ADDRESS 5007 PINEVIEW CHURCH RD WAYCROSS, GA 31503 CITY-ST-ZIP TITLE NAME JEWELL, MELANIE STREET ADDRESS 9417 HUNSTON MILL LN CITY-ST-ZIP JACKSONVILLE, FL 32244 TITLE NAME HARRIS, SHARON L STREET ADDRESS 21682 CR 121 CLTY-ST-7IP HILLIARD, FL 32046

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachi

SIGNATURE:

2-23-07 904-724-8267