

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001018

FILED
Jan 27, 2005
Secretary of State

Entity Name: MOTIVATED BY LOVE MINISTRIES, INC.

Current Principal Place of Business:

C/O SHEILA ZELLERS
1471 AIRPORT ROAD
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

C/O SHEILA ZELLERS
1471 AIRPORT ROAD
NAPLES, FL 34104

New Mailing Address:

FEI Number: 59-3638407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLASP, INC.
C/O CUMMINGS & LOCKWOOD
3001 TAMiami TRAIL NORTH, SUITE 400
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

MURPHY-PUTCHIE & ASSOCIATES INC.
2338 J & C BLVD.
NAPLES, FL 34109 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: THOMAS J MURPHY

01/27/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ZELLERS, SHEILA
Address: 403 NEOPOLITAN WAY
City-St-Zip: NAPLES, FL 34103

Title: TD () Delete
Name: ZELLERS, ROBERT T
Address: 403 NEOPOLITAN WAY
City-St-Zip: NAPLES, FL 34103

Title: SD () Delete
Name: RAUTENKRANZ, JOY
Address: 340 ROBINHOOD CIR
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ZELLERS, SHEILA
Address: 2400 TARPON RD.
City-St-Zip: NAPLES, FL 34102

Title: TD (X) Change () Addition
Name: ZELLERS, ROBERT T
Address: 2400 TARPON RD.
City-St-Zip: NAPLES, FL 34102

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: SHEILA M ZELLERS

P

01/27/2005

Electronic Signature of Signing Officer or Director

Date