## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000001972

FILED Apr 30, 2004 Secretary of State

Entity Name: CATHEDRAL OF LOVE CHRISTIAN CENTER, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
4016 S LAK MIRAMAR,	(E TERRACE FL 33023				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
4016 S LAK MIRAMAR,	(E TERRACE FL 33023				
FEI Number:	65-0616425	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
GRAHAM, JONATHAN C REV. 4016 S LAKE TERRACE MIRAMAR, FL 33023 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,					
in the State		·			
SIGNATURE: Date Date					
OFFICERS AND DIRECTORS:				GES TO OFFICERS AND DIRECTORS:	
OFFICERS AND DIRECTORS.					
Title: Name: Address: City-St-Zip:	S () GRAHAM, REBI 4016 S LAKE T MIRAMAR, FL	ERRACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () GRAHAM, JONA 4016 S LAKE T MIRAMAR, FL	ERR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () BUYCKS, JOE PO BOX 4264 MIAMI, FL 3320	Delete	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () SIMMONS, HAT 20522 NW 33 C MIAMI, FL 330	т	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () COCHRAN, FA\ 615 HAREM AV OPA LOCKA, FI	E	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: JONATHAN C. GRAHAM P 04/30/2004