

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002205

FILED  
Apr 23, 2004  
Secretary of State

Entity Name: LOVE FELLOWSHIP CHRISTIAN CHURCH, INC.

**Current Principal Place of Business:**

2019 WEST CHURCH STREET  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 540205  
ORLANDO, FL 32854

**New Mailing Address:**

FEI Number: 59-3637297

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROBINSON, SYLVESTER  
464 LANCERS DRIVE  
WINTER SPRINGS, FL 32708

**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: PD ( ) Delete  
Name: ROBINSON, SYLVESTER  
Address: 464 LANCERS DRIVE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VD ( ) Delete  
Name: ROBINSON, CYNTHIA  
Address: 464 LANCERS DRIVE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: TD ( ) Delete  
Name: YOUNG, ALPREO G  
Address: 1932 LAKE ATRIUM #79  
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete  
Name: ROBINSON, ALEXANDER  
Address: 464 LANCERS DRIVE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: SD ( ) Delete  
Name: JONES, JUANITA  
Address: 13615 SUNSHOWERS CIRCLE  
City-St-Zip: ORLANDO, FL 32828

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

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

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

Title: TD (X) Change ( ) Addition  
Name: YOUNG, ALPRED G  
Address: 1932 LAKE ATRIUM #79  
City-St-Zip: ORLANDO, FL

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

Title: SD (X) Change ( ) Addition  
Name: GARVEY, ELIZABETH  
Address: 2019 W. CHURCH ST.  
City-St-Zip: ORLANDO, FL 32805

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: SYLVESTER ROBINSON

PRES

04/23/2004

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

\_\_\_\_\_  
Date