

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007436

FILED
Apr 19, 2008
Secretary of State

Entity Name: TRUE LOVE MINISTRIES, INCORPORATED

Current Principal Place of Business:

TRUE LOVE MINISTRIES, INC
ORLANDO, FL 32828

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 678469
ORLANDO, FL 328678469

New Mailing Address:

FEI Number: 59-3734864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRISON, LARRY J SR.
700 FORESTGREEN COURT
ORLANDO, FL 32828 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: D () Delete
Name: HARRISON, LARRY J SR
Address: 700 FORESTGREEN COURT
City-St-Zip: ORLANDO, FL 32828

Title: D () Delete
Name: HARRISON, LOULENE B
Address: 700 FORESTGREEN COURT
City-St-Zip: ORLANDO, FL 32828

Title: D () Delete
Name: BROWN, JACKY A
Address: 1913 CASCADES COVE DR.
City-St-Zip: ORLANDO, FL 328202249

Title: D () Delete
Name: BEACHAM, KIP
Address: 1637 RIVEREDGE ROAD
City-St-Zip: OVIEDO, FL 32766

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: GRANT, RUFUS
Address: 6001 BEAU LANE.
City-St-Zip: ORLANDO, FL 32808

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

Title: D () Change (X) Addition
Name: ROUSE, JAMES
Address: 267 WILSON AVE
City-St-Zip: OVIEDO, FL 32765

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LARRY J. HARRISON SR

D

04/19/2008

Electronic Signature of Signing Officer or Director

Date