2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

5/2/

FILED
Jun 09, 2003 8:00 am
Secretary of State
05-02-2003 90727 044 ****61.25

DOCUMENT # N01000006714

1. Entity Name
TRUTH IN LOVE COMMUNITY CHURCH, INC,.

44003689

[redacted]

☑ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
1102 NORTH FLAGLER AVENUE HOMESTEAD FL 33030	1102 NORTH FLAGLER AVENUE HOMESTEAD FL 33030

2. Principal Place of Business	3. Mailing Address
28975 SW 194 AVE Suite, Apt. #, etc.	28975 SW 194 AVE Suite, Apt. #, etc.
City & State: Homestead, FL	City & State: Homestead, FL
Zip: 33030 Country: USA	Zip: 33030 Country: USA

4. FEI Number: 65-1140824 ☒ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HURLEY, LINDA C 451 SE 8 STREET #113 HOMESTEAD FL 33145	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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.

SIGNATURE: Linda Hurley 4/30/2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DE LA TORRES, CONRAD PASTOR 1102 NORTH FLAGLER AVENUE HOMESTEAD FL 33030	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DE LA TORRES, Conrad Pastor 28975 SW 194 AVENUE Homestead - FL - 33030	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DE LA TORRES, PATRICIA 1102 NORTH FLAGLER AVENUE HOMESTEAD FL 33030	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DE LA TORRES, Patricia 28975 SW 194 AVENUE Homestead - FL - 33030	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD PEREZ, MARIA L 1102 NORTH FLAGLER AVENUE HOMESTEAD FL 33030	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD PEREZ, MARIA L 28975 SW 194 AVENUE Homestead - FL - 33030	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REGINA PEREZ 4/30/2003 7864028139
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #