

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000643

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** THE LOVE OF CHRIST MINISTRIES INTERNATIONAL, INC.

**Current Principal Place of Business:**

11721 OXFORDSHIRE PLACE  
ORLANDO, FL 32824

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 771594  
ORLANDO, FL 32877

**New Mailing Address:**

**FEI Number:** 22-3894899

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: PD ( ) Delete  
Name: RILEY, THEODORE R JR  
Address: PO BOX 771594  
City-St-Zip: ORLANDO, FL 32877

Title: VSTD ( ) Delete  
Name: RILEY, LISA A  
Address: PO BOX 771594  
City-St-Zip: ORLANDO, FL 32877

Title: D ( ) Delete  
Name: NEGRON, ZORAIDA  
Address: PO BOX 771594  
City-St-Zip: ORLANDO, FL 32877

Title: D ( ) Delete  
Name: NAPOLEON, SAMUEL  
Address: PO BOX 771594  
City-St-Zip: ORLANDO, FL 32877

Title: D ( ) Delete  
Name: HAMMER, MARK  
Address: PO BOX 771594  
City-St-Zip: ORLANDO, FL 32877

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

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

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

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

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

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

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: LISA A. RILEY

VSTD

04/27/2009

Electronic Signature of Signing Officer or Director

Date