

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000964

FILED
Sep 01, 2006
Secretary of State

Entity Name: LOVE OUTREACH CHRISTIAN CENTER INC.

Current Principal Place of Business:

5045-21 SOUTEL DR
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

5045-21 SOUTEL DR
JACKSONVILLE, FL 32208

New Mailing Address:

FEI Number: 59-3683995 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MULLER, HERMAN JR
9030 SIBBALD RD.
JACKSONVILLE, FL 32208 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: P () Delete
Name: MULLER, HERMAN JR
Address: 9030 SIBBALD RD.
City-St-Zip: JACKSONVILLE, FL 32208

Title: S () Delete
Name: THOMPSON, DYLIHROUS
Address: 5838 GILCHRIST RD.
City-St-Zip: JACKSONVILLE, FL 32219

Title: DT () Delete
Name: SANDERS, ROSE M
Address: 7431 ROWAN CT
City-St-Zip: JACKSONVILLE, FL 32208

Title: DT () Delete
Name: WHITE, INEZ T
Address: 7127 UTSEY RD
City-St-Zip: JACKSONVILLE, FL 32217

Title: DT () Delete
Name: MASON, CATHERINE
Address: 6708 RHODE ISLAND DR W
City-St-Zip: JACKSONVILLE, FL 32209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: IVERY, VENSECIA E
Address: 1329 GROTHE STREET
City-St-Zip: JACKSONVILLE, FL 32209

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 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: HERMAN MULLER JR

P

09/01/2006

Electronic Signature of Signing Officer or Director

Date