

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000729

FILED  
May 07, 2010  
Secretary of State

Entity Name: LEAGUE OF LOVE, INC.

**Current Principal Place of Business:**

21286 HUBBARD AVE..  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

**Current Mailing Address:**

21286 HUBBARD AVE..  
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

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

ADAMS, BRUCE  
21286 HUBBARD AVE..  
PORT CHARLOTTE, FL 33952 US

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: DIR.  
Name: ADAMS, BRUCE  
Address: 21286 HUBBARD AVE..  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: DIR.  
Name: POOL, GINGER  
Address: 3079 CLEVELAND AVE  
City-St-Zip: FT MYERS, FL 33901

Title: DIR.  
Name: OAKS, CHONG S  
Address: 21286 HUBBARD AVE..  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: DIR  
Name: GERMAN, GABRIEL G  
Address: 131 WILLOW VIEW DR.  
City-St-Zip: DEVONPORT, FL 33896

Title: DIR  
Name: PRUTTING, STEVEN  
Address: 25721 KITFOX PL  
City-St-Zip: VALENCIA, CA 91355

I hereby 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 all other like empowered.

SIGNATURE: BRUCE ADAMS

DIR

05/07/2010

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

\_\_\_\_\_  
Date