

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005263

FILED  
Jan 21, 2010  
Secretary of State

Entity Name: CHARITY & LOVE, INC.

**Current Principal Place of Business:**

651  
ORLANDO, FL 32805

**New Principal Place of Business:**

5372 SILVER STAR ROAD  
ORLANDO, FL 32808

**Current Mailing Address:**

PO BOX 680965  
ORLANDO, FL 32868

**New Mailing Address:**

PO BOX 580758  
ORLANDO, FL 32858

FEI Number: 20-2182031

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANSAR, BARBARA  
2086 N. POWERS DR  
ORLANDO, FL 32818 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: CEO  
Name: ANSAR, BARBARA  
Address: 2086 N. POWERS DR.  
City-St-Zip: ORLANDO, FL 32818

Title: S  
Name: WILLIAMS, LAVERNE P  
Address: 1741 PEACHWOOD LANE  
City-St-Zip: ORLANDO, FL 32818

Title: D  
Name: HAGINS, WILL  
Address: 2219 CARAQUET DRIVE  
City-St-Zip: APOPKA, FL 32712

Title: T  
Name: FOGG, JANET  
Address: 302 INGLE NOOK  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: S  
Name: GOMEZ, FANNIE  
Address: 247 GROVE ST.  
City-St-Zip: ORLANDO, FL 32835

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: BARBARA ANSAR

CEO

01/21/2010

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

\_\_\_\_\_  
Date