## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000005790

FILED May 01, 2008 Secretary of State

Entity Nam	ne: MOTHER'S LOVE SCHOLARSHIP FOUNDA	ATION INC		
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
2033 SW 1 MIRAMAR,	17TH AVENUE FL 33025 US			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
2033 SW 1 MIRAMAR,	17TH AVENUE FL 33025 US			
FEI Number: 22-3904860 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) 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:				
	OBIN L DIRECTO 17TH AVENUE FL 33025 US			
The above in the State	named entity submits this statement for the purpo of Florida.	ose of changing its register	ed office or registered agent, or both,	
SIGNATUR				
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete LOVETT, MICHAEL N 2033 SW 117TH AVENUE MIRAMAR, FL 33025 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () Delete LOVETT, ROBIN L 2033 SW 117TH AVENUE MIRAMAR, FL 33025 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: ROBIN L. LOVETT VP 05/01/2008