

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011445

FILED  
Apr 19, 2007  
Secretary of State

**Entity Name:** LOVE PRIMITIVE FAMILY CHURCH INC.

**Current Principal Place of Business:**

2475 SOUTH ORANGE BLOSSOM TRAIL  
STE A  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 590192  
ORLANDO, FL 32859

**New Mailing Address:**

**FEI Number:** 76-0814132

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DULYSSE, JONATHAS G  
4608 TOWER PINE ROAD  
ORLANDO, FL 32839 US

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

DULYSSE, JONATHAS G  
5428 ARPANA DRIVE  
ORLANDO, FL 32839 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: JONATHAS G. DULYSSE

04/19/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DULYSSE, JONATHAS G  
Address: 4608 TOWER PINE ROAD  
City-St-Zip: ORLANDO, FL 32839

Title: VP ( ) Delete  
Name: DERA, CLAUDE  
Address: 309 RIO MANA STREET  
City-St-Zip: ORLANDO, FL 32809

Title: S ( ) Delete  
Name: MIRACLE, LOVINSKI  
Address: 125 SURA BOULEVARD  
City-St-Zip: ORLANDO, FL 32809

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

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

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

Title: S (X) Change ( ) Addition  
Name: JOSEPH, MISERE V SR  
Address: 1813 GRAND POINT BLVD APT.1106  
City-St-Zip: ORLANDO, FL 32839

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: JONATHAS G DULYSSE

P

04/19/2007

Electronic Signature of Signing Officer or Director

Date