

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011956

FILED
Apr 28, 2006
Secretary of State

Entity Name: I LOVE ME TOO FOUNDATION, INC.

Current Principal Place of Business:

103 WOODLAKE CIR
GREENACRES, FL 33463

New Principal Place of Business:

Current Mailing Address:

103 WOODLAKE CIR
GREENACRES, FL 33463

New Mailing Address:

FEI Number: 20-3878245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIP, CASSIUS
103 WOODLAKE CIR
GREENACRES, FL 33463 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: D () Delete
Name: PHILLIP, CASSIUS
Address: 103 WOODLAKE CIR
City-St-Zip: GREENACRES, FL 33463

Title: D () Delete
Name: PHILLIP, GAIL
Address: 103 WOODLAKE CIR
City-St-Zip: GREENACRES, FL 33463

Title: D () Delete
Name: JIMINEZ, JODI
Address: 4388 LAKE TAHOE CIR
City-St-Zip: W PALM BEACH, FL 33409

Title: D () Delete
Name: COLEMAN, SHELBY
Address: 930 DICKENS PLACE R
City-St-Zip: W PALM BEACH, FL 33411

Title: D () Delete
Name: HOWARD, MAY
Address: 5303 BLUEBERRY HILL
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: CASSIUS PHILLIP

D

04/28/2006

Electronic Signature of Signing Officer or Director

Date