


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2004 08:00 AM
Secretary of State

DOCUMENT # N05182 1. Entity Name HIS LOVE REACHING, INC.	
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Principal Place of Business C/O GEORGE A. RUBIN 1488 FORAND CIRCLE PORT CHARLOTTE, FL 33952	Mailing Address C/O GEORGE A. RUBIN 1488 FORAND CIRCLE PORT CHARLOTTE, FL 33952
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DO NOT WRITE IN THIS SPACE



03292004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2466063	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RUBIN, GEORGE A.
1488 FORAND CIRCLE
PORT CHARLOTTE, FL 33952

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	03/31/04-80033-007 70.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RUBIN, GEORGE A. 1488 FORAND CIRCLE PORT CHARLOTTE, FL 33952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD RUBIN, NANCY M. 1488 FORAND CIRCLE PORT CHARLOTTE, FL 33952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD OSORNIO, LANA G. 1019 GATEWAY LAKES CIRCLE, APT 1212 SARASOTA, FL 34232
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRANTLEY, RICHARD L 3223 PROCTOR ROAD SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nancy M. Rubin NANCY M. RUBIN 3-29-04 941-629-7686
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #