

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010344

FILED  
Apr 04, 2009  
Secretary of State

**Entity Name:** GREATER LOVE COMMUNITY DEVELOPMENT, INC.

**Current Principal Place of Business:**

524 E. ORANGE AVENUE  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4095  
TALLAHASSEE, FL 32315

**New Mailing Address:**

**FEI Number:** 56-2614392

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRANTLEY, CHARLES J  
524 E. ORANGE AVENUE  
TALLAHASSEE, FL 32301 US

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

BRANTLEY, RUTH  
524 E. ORANGE AVENUE  
TALLAHASSEE, FL 32301 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: RUTH BRANTLEY

04/04/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BRANTLEY, C J  
Address: PO BOX 696  
City-St-Zip: MIDWAY, FL 32343

Title: P ( ) Delete  
Name: PERRY, E  
Address: P O BOX 38117  
City-St-Zip: TALLAHASSEE, FL 32315 US

Title: D ( ) Delete  
Name: BRANTLEY, RUTH  
Address: P O BOX 696  
City-St-Zip: MIDWAY, FL 32343

Title: D ( ) Delete  
Name: JOHNSON, E L  
Address: PO BOX 5013  
City-St-Zip: TALLAHASSEE, FL 32314

Title: D/S ( ) Delete  
Name: ROGONY, W R  
Address: PO BOX 3835  
City-St-Zip: TALLAHASSEE, FL 32315

Title: D/VP (X) Delete  
Name: WATSON, R R  
Address: PO BOX 38117  
City-St-Zip: TALLAHASSEE, FL 32315

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

Title: P/D (X) Change ( ) Addition  
Name: PERRY, ERMA  
Address: P O BOX 38117  
City-St-Zip: TALLAHASSEE, FL 32315 US

Title: VP/D (X) Change ( ) Addition  
Name: WATSON, ROBIN R  
Address: P O BOX 38117  
City-St-Zip: TALLAHASSEE, FL 32315 US

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 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: WANDA ROGONY

D/S

04/04/2009

Electronic Signature of Signing Officer or Director

Date