

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012423

FILED
Sep 05, 2007
Secretary of State

Entity Name: ONE LOVE - ONE COMMUNITY FOUNDATION, INC.

Current Principal Place of Business:

3969 OCALA ROAD
LANTANA, FL 33462

New Principal Place of Business:

Current Mailing Address:

3969 OCALA ROAD
LANTANA, FL 33462

New Mailing Address:

FEI Number: 43-2115767 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

HAIDER, BARBARA
3969 OCALA ROAD
LANTANA, FL 33462 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: P () Delete
Name: HAIDER, BARBARA
Address: 3969 OCALA ROAD
City-St-Zip: LANTANA, FL 33462

Title: S () Delete
Name: LINK, KENYON
Address: 4510 PORTOFINO WAY, STE 309
City-St-Zip: WEST PALM BEACH, FL 33409

Title: S () Delete
Name: SHARPE, FARRAH
Address: 4510 PORTOFINO WAY, STE 309
City-St-Zip: WEST PALM BEACH, FL 33409

Title: T () Delete
Name: BLAKE, DONALD
Address: 13461 71ST PLACE NORTH
City-St-Zip: WEST PALM BEACH, FL 33412

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:

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: PRESIDENT

P

09/05/2007

Electronic Signature of Signing Officer or Director

Date