

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000000160

FILED
Nov 17, 2009
Secretary of State

Entity Name: LOVING HEARTS OUTREACH CENTER INC.

Current Principal Place of Business:

3417 PLEASANT LAKE DR
TAMPA, FL 33618

New Principal Place of Business:

15420 PLANTATION OAKS DRIVE
APT 16
TAMPA, FL 33647

Current Mailing Address:

P.O.BOX 11341
TAMPA, FL 33680

New Mailing Address:

FEI Number: 06-1802728 **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:

Name and Address of New Registered Agent:

JOHNSON LINDSEY, TWILA C
4330 MARCHMONT BLVD
LAND O' LAKE, FL 34628 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: TWILA C JOHNSON LINDSEY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOHNSON, DAVID J
Address: 1020 MCNEEME STREET
City-St-Zip: LEEBURG, FL 33697

Title: VP () Delete
Name: BARNET, JAMAAL A
Address: 2307 E COLBY
City-St-Zip: TAMPA, FL 33612

Title: ETC () Delete
Name: JOHNSON, DONNNIE C
Address: 3417 PLEASANT LAKE DR
City-St-Zip: TAMPA, FL 33618

Title: ETC () Delete
Name: LINTON, SHANELL
Address: 713 ERIK LAKE RD
City-St-Zip: BRANDON, FL 33510

Title: ETC () Delete
Name: JOHNSON LINDSEY, TWILA C
Address: 4330 MARCHMONT BLVD
City-St-Zip: TAMPA, FL 34628

Title: ETC () Delete
Name: MORLEY, LORISA
Address: 108660 HOFFER EDGE DR.
City-St-Zip: RIVERVIEW, FL 33579

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOHNSON, DAVID J
Address: 1012 MCNAMEE STREET
City-St-Zip: LEESBURG, FL 34748

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 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: DAVID J. JOHNSON

P

11/17/2009

Electronic Signature of Signing Officer or Director

Date