## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N07000005527

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

**DAVIE. FL 33325** 

PASSWATERS, DONALD

8315 NW 201 TERRACE

HIALEAH, FL 33015

( ) Delete

S/T

FILED Nov 02, 2009 Secretary of State

Entity Name: LOVE NEVER FAILS MINISTRIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 17320 NW 82 COURT HIALEAH, FL 33015 **Current Mailing Address: New Mailing Address:** 17320 NW 82 COURT HIALEAH, FL 33015 FEI Number: 56-2660837 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: APFEL, ALAN 17320 NW 82 COURT HIALEAH, FL 33015 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete APFEL, ALAN Name: Name: Address: 17320 NW 82 COURT Address: City-St-Zip: HIALEAH, FL 33015 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition Name: MORALES, WILLIAM Name: PASSWATERS, DONALD Address: 603 RACQUET CLUB RD #3 Address: 8315 NW 201 TERRACE City-St-Zip: WESTON, FL 33326 City-St-Zip: HIALEAH, FL 33015 Title: () Delete Title: () Change () Addition BAEZA, EDUARDO Name: Name: **620 SW 133 TERRACE** 

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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

S/T

APFEL, BEVERLY

17320 NW 82 COURT

HIALEAH, FL 33015

(X) Change ( ) Addition

SIGNATURE: ALAN APFEL Ρ 11/02/2009