2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008836

Entity Name: LOVE UNVEILED INC

FILED Jan 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 14218 TANJA KING BOULEVARD ORLANDO, FL 32828 **Current Mailing Address: New Mailing Address:** PO BOX 560597 14218 TANJA KING BOULEVARD ORLANDO, FL 32828 ORLANDO, FL 32856 FEI Number: 26-1174505 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: DICKSON, ELIZABETH J 14218 TANJA KING BOULEVARD ORLANDO, FL 32828 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: (X) Change () Addition () Delete DICKSON, ELIZABETH J DICKSON, ELIZABETH J Name: Name: 14218 TANJA KING BOULEVARD Address: 14218 TANJA KING BOULEVARD Address: ORLANDO, FL 32828 City-St-Zip: City-St-Zip: ORLANDO, FL 32828 Title: () Delete Title: (X) Change () Addition JOHNSON, AMANDA Name: Name: JOHNSON, AMANDA Address: 1100 OAKBRIDGE PARKWAY #10 Address: 1100 OAKBRIDGE PARKWAY #10 City-St-Zip: ORLANDO, FL 33803 City-St-Zip: LAKELAND, FL 33803 Title: () Delete Title: () Change () Addition VAUGHN, PAMELA Name: Name: 175 WEST SABAL PALM PLACE Address: Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ROBERTS, JERRY Name: 1249 WATERWITCH COVE Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: Title: () Delete Title: () Change (X) Addition LIVINGSTON, DOLORES Name: Name: 4945 LAZY OAKS WAY Address: Address: City-St-Zip: City-St-Zip: ST CLOUD, FL 34771 Title: () Delete Title: () Change (X) Addition BALBOA, CATHI Name: Name: Address: Address: 657 TOMLINSON TERRACE LAKE MARY, FL 32746 City-St-Zip: 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: ELIZABETH J DICKSON ED 01/20/2009