2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000214

Entity Name: LOVE AND HOPE IN ACTION, INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5088 SE ALICIA ST. STUART, FL 34997 **Current Mailing Address: New Mailing Address:** 5088 SE ALICIA ST STUART, FL 34997 FEI Number: 74-3238584 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: HENDERSHOT, BRENDA 5088 SE ALICIA ST. STUART, FL 34997 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: () Delete () Change () Addition DALLAK, MICHAEL Name: Name: 6511 SHERWOOD ST. Address: Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: Title: Title: (X) Change () Addition () Delete MCINTOSH, LARRY M. Name: HOWARD, LARRY Name: Address: 6263 SE WINDSONG LANE Address: 8081 S. E. EVERGREEN STREET City-St-Zip: STUART, FL 34997 City-St-Zip: HOBE SOUND, FL 33455 Title: () Delete Title: () Change () Addition HENDERSHOT, BRENDA Name: Name: 5088 SE ALICIA ST. Address: Address: City-St-Zip: STUART, FL 34997 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: COOLIDGE, KEN Name: O'BRIEN, GAIL 2740 S.W. MARTIN DOWNS BLVD. PMB #335 Address: 13023 SE HOBE HILLS DR. Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: PALM CITY, FL 34990 Title: () Delete Title: (X) Change () Addition COOPER, J. STEVENS KUJAWA, SUSAN Name: Name: 844 SE OCEAN DR., STE. D 5501 S.E. MEADOW SPRINGS BLVD. Address: Address: City-St-Zip: STUART, FL 34994 City-St-Zip: STUART, FL 34997 Title: () Delete Title: (X) Change () Addition DAVIS, CHARLES MELDAU, JULIE Name: Name: Address: 8081 SE EVERGREEN ST. Address: 5400 S.E. JACK AVE. LOT H5 HOBE SOUND, FL 33455 STUART, FL 34997 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: BRENDA HENDERSHOT ST 04/21/2009