2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# N34072

Entity Name: LOVE IS FOR ETERNITY, INC.

Current Principal Place of Business:

7511 LITTLE RD., BUILDING C, SUITE B
NEW PORT RICHEY, FL 34654 US

New Principal Place of Business:

Current Mailing Address:

4107 CITRUS DRIVE
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

FEI Number: 59-2982612 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOONE, GAYLE H.
4701 CITRUS DRIVE
NEW PORT RICHEY, FL 34652 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: VPD ( ) Delete
Name: HAMMOND, PETE
Address: 2412 VAN WISE AVENUE
City-St-Zip: MADISON, WI 53705

Title: PD ( ) Delete
Name: HOONE, GAYLE
Address: 4701 CITRUS DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: TD ( ) Delete
Name: BOYLE, DALE
Address: 4642 ADDAX DR
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete
Name: HAMMOND, SHIRLEY
Address: 2412 VAN WISE AVENUE
City-St-Zip: MADISON, WI 53705

Title: VPD ( ) Delete
Name: BOYLE, DEBBIE
Address: 4542 ADDAZ DR
City-St-Zip: NEW PORT RICHEY, FL 34652

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:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GAYLE HOONE PD 04/25/2005

Electronic Signature of Signing Officer or Director — Date