

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 09 1997 8:00am  
Secretary of State

|   |  |  |  |
|---|--|--|--|
| NONPROFIT CORPORATION<br>ANNUAL REPORT<br><b>1997</b>   |  | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS |  |
| DOCUMENT # <b>N 38023</b>   |  |  |  |
| 1. Corporation Name<br>God is Love Ministry, Inc.<br>609 Short Street<br>Plant City, FL 33566 |  |  |  |
| Principal Place of Business<br>2209 W. Reynolds St.<br>Plant City, FL 33566                   |  | Mailing Address<br>609 Short Street<br>Plant City, FL 33566  |  |

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\*\*\*8.75

|                                |  |                         |  |   |  |  |  |
|--------------------------------|--|-------------------------|--|---|--|--|--|
| 2. Principal Place of Business |  | 2a. Mailing Address     |  | 3. Date Incorporated or Qualified   |  | 3a. Date of Last Report  |  |
| 21 2209 W. Reynolds St.        |  | 26 609 S. Short St.     |  | May 4, 1990   |  | 1996 4/5/96  |  |
| Suite Apt. #, etc.             |  | Suite, Apt. #, etc.     |  | 4. FEI Number   |  | <input checked="" type="checkbox"/> Applied For                                  |  |
| 22                             |  | 27                      |  | (Applied For)   |  | Not Applicable   |  |
| City & State                   |  | City & State            |  | 5. Certificate of Status Desired  |  | <input checked="" type="checkbox"/> \$8.75 Additional Fee Required               |  |
| 23 Plant City, FL 33566        |  | 28 Plant City, FL 33566 |  | 6. Election Campaign Financing Trust Fund Contribution                                  |  | <input type="checkbox"/> \$5.00 May Be Added to Fees                             |  |
| Zip                            |  | Zip                     |  | Country   |  | Country  |  |
| 24 33566                       |  | 29 33566                |  | 30 U.S.A.   |  | U.S.A.   |  |
| Country                        |  | Country                 |  | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Non-Profit) |  |

|   |  |  |  |
|---|--|--|--|
| 9. Name and Address of Current Registered Agent   |  | 10. Name and Address of New Registered Agent   |  |
| Ernestine Davis<br>Registered Agent   |  | 81 Name Ernestine Davis<br>82 Street Address (P.O. Box Number is Not Acceptable) 609 Short Street<br>83 Plant City, FL 33566<br>84 City FL 85 Zip Code 33566 |  |
| 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. |  |  |  |
| SIGNATURE Ernestine Davis, Registered Agent   |  | 4/3/97   |  |
| Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE  |  |  |  |

|                            |                                 |   |  |
|----------------------------|---------------------------------|---|--|
| 12. OFFICERS AND DIRECTORS |                                 | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
| TITLE                      | <input type="checkbox"/> DELETE | 1.1 TITLE   | President <input type="checkbox"/> Change <input type="checkbox"/> Addition          |
| NAME                       |                                 | 1.2 NAME  | John Davis, Sr.  |
| STREET ADDRESS             |                                 | 1.3 STREET ADDRESS                                    | 609 Short Street   |
| CITY - ST - ZIP            |                                 | 1.4 CITY - ST - ZIP                                   | Plant City, FL 33566   |
| TITLE                      | <input type="checkbox"/> DELETE | 2.1 TITLE   | Vice President <input type="checkbox"/> Change <input type="checkbox"/> Addition     |
| NAME                       |                                 | 2.2 NAME  | Darryl Davis   |
| STREET ADDRESS             |                                 | 2.3 STREET ADDRESS                                    | 609 Short Street   |
| CITY - ST - ZIP            |                                 | 2.4 CITY - ST - ZIP                                   | Plant City, FL 33566   |
| TITLE                      | <input type="checkbox"/> DELETE | 3.1 TITLE   | Director <input type="checkbox"/> Change <input type="checkbox"/> Addition           |
| NAME                       |                                 | 3.2 NAME  | Cathye Davis   |
| STREET ADDRESS             |                                 | 3.3 STREET ADDRESS                                    | 609 Short Street   |
| CITY - ST - ZIP            |                                 | 3.4 CITY - ST - ZIP                                   | Plant City, FL 33566   |
| TITLE                      | <input type="checkbox"/> DELETE | 4.1 TITLE   | Director/Secretary <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                 | 4.2 NAME  | Brenda Davis   |
| STREET ADDRESS             |                                 | 4.3 STREET ADDRESS                                    | 609 Short Street   |
| CITY - ST - ZIP            |                                 | 4.4 CITY - ST - ZIP                                   | Plant City, FL 33566   |
| TITLE                      | <input type="checkbox"/> DELETE | 5.1 TITLE   | Treasurer <input type="checkbox"/> Change <input type="checkbox"/> Addition          |
| NAME                       |                                 | 5.2 NAME  | Ernestine Davis  |
| STREET ADDRESS             |                                 | 5.3 STREET ADDRESS                                    | 609 Short Street   |
| CITY - ST - ZIP            |                                 | 5.4 CITY - ST - ZIP                                   | Plant City, FL 33566   |
| TITLE                      | <input type="checkbox"/> DELETE | 6.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                    |
| NAME                       |                                 | 6.2 NAME  | Patricia D. Glover   |
| STREET ADDRESS             |                                 | 6.3 STREET ADDRESS                                    | 609 Short Street   |
| CITY - ST - ZIP            |                                 | 6.4 CITY - ST - ZIP                                   | Plant City, FL 33566   |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ernestine Davis, Treasurer

4/3/97 (813) 752-6472

CR2E037 (9/96)