

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43691

FILED  
Mar 08, 2006  
Secretary of State

Entity Name: LOVE INC. OF SUWANNEE COUNTY

## Current Principal Place of Business:

830 PINWOOD ST  
LIVE OAK, FL 32064 US

## New Principal Place of Business:

## Current Mailing Address:

P.O BOX 1315  
LIVE OAK, FL 32064 US

## New Mailing Address:

FEI Number: 59-3086192

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PETERS, VIRGINIA  
9267 141ST DR  
LIVE OAK, FL 32060 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: DS ( ) Delete  
Name: SMITH, LINDA  
Address: 18382 CR 136  
City-St-Zip: LIVE OAK, FL 32060

Title: D ( ) Delete  
Name: GOODSMARK, WAYNE  
Address: 1550 S. WALKER AVE  
City-St-Zip: LIVE OAK, FL 32064

Title: DT ( ) Delete  
Name: FULLBRIGHT, JOYCE  
Address: 7182 52ND ST  
City-St-Zip: LIVE OAK, FL 32060

Title: D ( ) Delete  
Name: JONES, MAE  
Address: 6687 175TH DR  
City-St-Zip: LIVE OAK, FL 32060

Title: D ( ) Delete  
Name: WOOD, WINIFRED  
Address: 11202 SR 51  
City-St-Zip: LIVE OAK, FL 32060

Title: D ( ) Delete  
Name: WILDING, RANDY  
Address: 830 PINWOOD ST  
City-St-Zip: LIVE OAK, FL 32064

## 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: D (X) Change ( ) Addition  
Name: EDWARDS, WINONA  
Address: 18170 CR 136  
City-St-Zip: LIVE OAK, FL 32060

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

Title: D (X) Change ( ) Addition  
Name: HARVARD, LEE  
Address: 580 PINE AVE  
City-St-Zip: LIVE OAK, FL 32064

I hereby certify that the information supplied with this filing does not qualify for the 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: VIRGINIA PETERS

DIR

03/08/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date