## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Jan 31, 2005 08:00 AM DOCUMENT # N92000000012 **Secretary of State** 1. Entity Name "LOVE THY NEIGHBOR" FUND, INC. Principal Place of Business Mailing Address 1 NW 33RD TERRACE 1 NW 33RD TERRACE FORT LAUDERDALE FL 33311 FORT LAUDERDALE FL 33311 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 16-0319908 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ABBOTT, ARNOLD P Street Address (P.O. Box Number is Not Acceptable) 1 NW 33RD TERRACE FORT LAUDERDALE FL 33311 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTOR 10, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD J00000208326 □ Change 1705-80081-004 61.25 TITLE Delete Addition ABBOTT, ARNOLD P NAME NAME 6864 NW 25TH WAY STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33309 CITY-ST-ZIP CLTY-ST-ZIP TITLE ☐ Delete THLE ☐ Change Addition WOELTJEN, KRISTINA NAME 3650 SW 23RD ST STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33312 CITY-ST-7IP CITY-ST-ZIP DILE Delete ☐ Change ☐ Addition MACK, SUE NAME NAME 6400 ARTHUR ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33024 CITY-SI-ZIP DILE Delete THE ☐ Change ☐ Addition BURKHART, WILLIAM NAME NAME 1914 N E 19TH ST STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33305 CITY-ST-ZIP CITY-ST-ZIP CSD TITLE Delete ☐ Change ☐ Addition WOELTJEN, KATHY NAME NAME 3650 SW 23RD ST STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33312 CITY-ST-ZIP CITY-SI-ZIP TITLE Delete me ☐ Change Addition DAMSKY, DEBRA NAME 8086 N SAVANNAH CIRCLE STREET ADDRESS STREET ADDRESS **DAVIE FL 33312** CITY-ST-7IP CHY-ST-ZIP

**FILED** 

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ARNOW (ASSOCIATION CONTINUES)