

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N92000000731

1. Entity Name

LOVE WORKS HOMELESS MINISTRY, INC.

Principal Place of Business

909 NORTHERN DRIVE
LAKE PARK FL 33403
US

Mailing Address

909 NORTHERN DRIVE
LAKE PARK FL 33404
US

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

SAME

Suite, Apt. #, etc.

SAME

City & State

SAME

City & State

SAME

Zip

SAME

Country

SAME

Zip

SAME

Country

SAME

4. FEI Number

65-0484209

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COLLINS, MARGARET
909 NORTHERN DRIVE
LAKE PARK FL 33403

7. Name and Address of New Registered Agent

Name

COLLINS, MARGARET

Street Address (P.O. Box Number is Not Acceptable)

909 NORTHERN DRIVE

City

LAKE PARK,

FL

Zip Code

33403

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.

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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PC ☐ Delete
NAME COLLINS, MARGARET K
STREET ADDRESS 909 NORTHERN DR
CITY-ST-ZIP LAKE PARK FL 33403

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ST ☐ Delete
NAME COLLINS, ROSALYN R
STREET ADDRESS 909 NORTHERN DR
CITY-ST-ZIP LAKE PARK FL 33403

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE IVP ☒ Delete
NAME BANTA, JOY
STREET ADDRESS 708 PINEGROVE
CITY-ST-ZIP JUPITER FL 34058

TITLE ☒ Change ☐ Addition
NAME IVP
STREET ADDRESS BROWN, NORMA
CITY-ST-ZIP 12775 PINEWOOD ROAD
NORTH PALM BEACH, FLORIDA 33408

TITLE D ☐ Delete
NAME BOISUERT, FRANCES
STREET ADDRESS 3035 S MILITARY TRAIL
CITY-ST-ZIP LAKE WORTH FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME BARBER, ROBERT
STREET ADDRESS 13330 ST TROPEZ CIR
CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME MANTAS, SARA JANE
STREET ADDRESS 1311 13TH TERR AVE
CITY-ST-ZIP PALM BEACH GARDENS FL 33418

TITLE ☒ Change ☐ Addition
NAME D
STREET ADDRESS MANIAS, SARA JANE
CITY-ST-ZIP 3717 SUMMERWIND AVE.
OKLAHOMA CITY, OKLAHOMA 73179

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:

[Signature]

5-8-01

CR2E037 (10/00)