2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 06, 2004
Secretary of State

DOCUMENT# N92000000731

Entity Name: LOVE WORKS HOMELESS MINISTRY, INC.

Current Principal Place of Business:

909 NORTHERN DRIVE
LAKE PARK, FL 33403 US

New Principal Place of Business:

Current Mailing Address:

909 NORTHERN DRIVE
LAKE PARK, FL 33404 US

New Mailing Address:

FEI Number: 65-0484209 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLLINS, MARGARET
909 NORTHERN DRIVE
LAKE PARK, FL 33403 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: PC ( ) Delete
Name: COLLINS, MARGARET K
Address: 909 NORTHERN DR
City-St-Zip: LAKE PARK, FL 33403

Title: ST ( ) Delete
Name: COLLINS, ROSALYN R
Address: 909-NORTHERN DR
City-St-Zip: LAKE PARK, FL 33403

Title: 1VP ( ) Delete
Name: BROWN, NORMA
Address: 12775 PACKWOOD ROAD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D ( ) Delete
Name: BOISUERT, FRANCES
Address: 3035 S MILITARY TRAIL
City-St-Zip: LAKE WORTH, FL

Title: D ( ) Delete
Name: BARBER, ROBERT
Address: 13330 ST TROPEZ CIR
City-St-Zip: PALM BEACH GARDENS, FL

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: MARGARET K. COLLINS PC 11/06/2004

Electronic Signature of Signing Officer or Director — Date