

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000488

FILED
Apr 01, 2008
Secretary of State

Entity Name: FAITH-HOPE-LOVE-CHARITY, INC.

Current Principal Place of Business:

3175 S CONGRESS AVE
STE #304
PALM SPRINGS, FL 33461 US

New Principal Place of Business:

Current Mailing Address:

3175 S CONGRESS AVE
STE #304
PALM SPRINGS, FL 33461 US

New Mailing Address:

FEI Number: 65-0464807 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWARTZ, HOWARD L
3175 S. CONGRESS AVE
SUITE 304
PALM SPRINGS, FL 33461 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: PRES () Delete
Name: CLAY, SANJENA V
Address: 407 MICHIGAN PLACE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: EDIR () Delete
Name: FOSTER, ROY
Address: 3836 COLLINWOOD LANE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D () Delete
Name: SMITH, IRA
Address: 3836 COLLINWOOD LANE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D () Delete
Name: SIMKAITIS, HAL
Address: 13699 LAVENDER LANE
City-St-Zip: WELLINGTON, FL 33414

Title: SECR () Delete
Name: MURRAY, DENISE
Address: 844 JAMAICAN DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415

Title: TREA () Delete
Name: FOSTER, TAIRETHA C
Address: 3836 COLLINWOOD LANE
City-St-Zip: WEST PALM BEACH, FL 33406

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: STEVEN, BURGHART
Address: 408 RIGHT HOUSE DRIVE
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: SECR (X) Change () Addition
Name: MURRAY, DENISE
Address: DENISE MURRY
City-St-Zip: WEST PALM BEACH, FL 334401

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

I hereby certify that the information supplied with this filing does not qualify 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: ROY J. FOSTER

DIRE

04/01/2008

Electronic Signature of Signing Officer or Director

Date