

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90530 041 ****61.25

DOCUMENT # N95000002173

1. Entity Name

LOVE CENTER OUTREACH MINISTRIES, INC.



Principal Place of Business

1305 WEST SCOTT STREET
PENSACOLA FL 32501

Mailing Address

1305 WEST SCOTT STREET
PENSACOLA FL 32501
US

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WEBSTER, JAMES E
614 EAST BELMONT STREET
PENSACOLA FL 32501

7. Name and Address of New Registered Agent

Name

Webster, James E.

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

2410 West Jordan Street

City

Pensacola

FL

Zip Code

32505

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

James E. Webster

James E. Webster

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
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	WEBSTER, JAMES E	
STREET ADDRESS	4600 TWIN OAKS 902	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	NEILLY, HARRISON	
STREET ADDRESS	614 E. BELMONT STREET	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	WEBSTER, JAMES E	
STREET ADDRESS	614 EAST BELMONT STREET	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	S	<input type="checkbox"/> Delete
NAME	MAREBA, RANDELL	
STREET ADDRESS	1100 SCENIC HWY APT 100	
CITY-ST-ZIP	PENSACOLA FL 32503	
TITLE	D	<input type="checkbox"/> Delete
NAME	DEBORAH, WEBSTER S	
STREET ADDRESS	4600 TWIN OAK DR 902	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE	D	<input type="checkbox"/> Delete
NAME	NEILLY, HARRISON	
STREET ADDRESS	611 WEST JORDAN STREET	
CITY-ST-ZIP	PENSACOLA FL 32501	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Webster, James E	
STREET ADDRESS	2410 West Jordan St.	
CITY-ST-ZIP	Pensacola, FL. 32505	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Deborah, Webster S	
STREET ADDRESS	2410 West Jordan St.	
CITY-ST-ZIP	Pensacola, FL. 32505	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

James E. Webster

James E. Webster

4-23-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #