

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001452

FILED
Jun 18, 2009
Secretary of State

Entity Name: TRUE LOVE INTERNATIONAL, INC.

Current Principal Place of Business:

1050 HILLSBORO MILE
#808
HILLSBORO BEACH, FL 33062 US

Current Mailing Address:

1132 SHANE COURT
VENICE, FL 34293

New Principal Place of Business:

1050 HILLSBORO MILE
#808
HILLSBORO BEACH, FL 33062 US

New Mailing Address:

1824 N. SUNKIST CIRCLE
DEPERE, WI 54115

FEI Number: 65-0728592 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HOSKINS, DAVID S
1050 HILLSBORO MILE
#808
HILLSBORO BEACH, FL 33062 US

Name and Address of New Registered Agent:

HOSKINS, DAVID S
1050 HILLSBORO MILE
#808
HILLSBORO BEACH, FL 33062 US

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: DAVID S. HOSKINS

06/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOSKINS, DAVID S
Address: 1050 HILLSBORO MILE #808
City-St-Zip: HILLSBORO BEACH, FL 33062

Title: D () Delete
Name: HOSKINS, TANYA A
Address: 1050 HILLSBORO MILE #808
City-St-Zip: HILLSBORO BEACH, FL 33062

Title: VD () Delete
Name: MANRIQUE, IVAN
Address: 600 SW 3RD STREET
City-St-Zip: POMPANO BEACH, FL 33060 RU

Title: STD () Delete
Name: NACHTWEY, KIMBERLY D
Address: 1132 SHANE COURT
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOSKINS, DAVID S
Address: 1050 HILLSBORO MILE #808
City-St-Zip: HILLSBORO BEACH, FL 33062

Title: D (X) Change () Addition
Name: HOSKINS, TANYA A
Address: 1050 HILLSBORO MILE #808
City-St-Zip: HILLSBORO BEACH, FL 33062

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

Title: STD (X) Change () Addition
Name: NACHTWEY, KIMBERLY D
Address: 1824 N. SUNKIST CIRCLE
City-St-Zip: DEPERE, WI 54115

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: KIMBERLY D. NACHTWEY

D

06/18/2009

Electronic Signature of Signing Officer or Director

Date