2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 01, 2006 8:00 am **Secretary of State** DOCUMENT # N96000006546 03-01-2006 90026 030 ****61.25 TRUTH IN LOVE MINISTRY, INC. Principal Place of Business Mailing Address 909 STREAMLET AVENUE SEBASTIAN FL 32958 909 STREAMLET AVENUE SEBASTIAN FL 32958 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State City & State 4. FEI Number 65-0716182 Not Applicable Zip Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name AREND, DOLORES Street Address (P.O. Box Number is Not Acceptable) 909 STREAMLET AVENUE SEBASTIAN FL 32958 City Zip Code 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PRATT. ANTONIA G. TITLE ☐ Delete THTLE ☐ Change ★ Addition FARAG, NASSER S NAME 1210 White Wing Dr. DELTA LAKE RESORT, LOT 79 STREET ADDRESS STREET ADDRESS MONTE ALTO TX 78538 CITY+ST-7IP CITY-ST-7IP Harlingen, TX 78550 ☐ Change ☐ Addition TITLE ☐ Delete TITLE PARKER, WILLETTE E NAME NAME 18 S. AZTEC COVE DR. STREET ADDRESS STREET ADDRESS LAS FRESNOS TX 78566 CITY-ST-ZIP CITY-ST-ZIE TITLE Delete TITLE ☐ Change Addition FARAG, MARILYN S NAME NAME STREET ADDRESS DELTA LAKE RESORT, LOT 79 STREET ADDRESS MONTE ALTO TX 78538 CITY-ST-ZIP CITY-ST-ZIP VΝ TITLE ☐ Delete TITLE Change ☐ Addition TODD, JULIA L NAME NAME STREET ADDRESS 822 E. BUCHANAN STREET ADDRESS CITY-ST-ZIP HARLINGEN TX 78550 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition PRATT, JAMES L NAME NAME 1210 WHITE WING DR. STREET ADDRESS STREET ADDRESS HARLINGEN TX 78550 CITY-ST-ZIP CITY-ST-ZIP Defete TITLE ☐ Change ☐ Addition TITLE TODD, KENNETH NAME NAME 27843 DILWORTH RD. STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

CITY+ST-ZIP

SIGNATURE: Marel m S. Farage

HARLINGEN TX 78552

MARILYN S. FARAG

2-21-2006

FILED

956-262-1649