

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2003 8:00 am
Secretary of State

04-29-2003 90075 037 *****70.00

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1. Entity Name

**COMMUNITY OUTREACH CENTER OF LOVE, INTERNATIONAL
, INC.**



Principal Place of Business

677 N. HERNANDO STREET
LAKE CITY FL 32055

Mailing Address

1593 WILSON STREET
LAKE CITY FL

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

847 NW Wilson St

LAKE CITY FL

32055

America



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 36-4216187

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HENRY, GWENDOLYN
1593 WILSON ST.
LAKE CITY FL 32055-1829

7. Name and Address of New Registered Agent

Name

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

City

FL

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

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

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 P
NAME HENRY, GWENDOLYN A
STREET ADDRESS 1593 WILSON STREET
CITY-ST-ZIP LAKE CITY FL 32058 ☐ Delete

TITLE D
NAME ALLEN, WILLIE MAE
STREET ADDRESS 1460 DYSON STREET
CITY-ST-ZIP LAKE CITY FL 32055 ☒ Delete

TITLE D
NAME HENRY, AMIE L
STREET ADDRESS 608 MOULTRIE RD. APT. A-7
CITY-ST-ZIP ALBANY GA ☒ Delete

TITLE D
NAME ALLEN, EDDIE L
STREET ADDRESS 1160 LONG STREET
CITY-ST-ZIP LAKE CITY FL 32055 ☐ Delete *Change Address -*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D-sec
NAME Wanda L. Alston
STREET ADDRESS 1308 Wilson Street
CITY-ST-ZIP Lake City FL 32055 ☒ Change ☒ Addition

TITLE D
NAME Valentine Jackson
STREET ADDRESS Rt 8 Box 355
CITY-ST-ZIP Lake City FL 32055 ☒ Change ☒ Addition

TITLE D
NAME Eddie L. Allen
STREET ADDRESS Rt 1 Box 540-2
CITY-ST-ZIP Lake City FL 32055 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Gwendolyn Henry REQUIRED

4/28/03 386755-9451

CR2E037 (10/02)