

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9800000535

FILED
May 02, 2009
Secretary of State

Entity Name: LOVE IN ACTION, INC.

Current Principal Place of Business:

9780 E INDIGO STREET
203
PALMETTO BAY, FL 33157

Current Mailing Address:

PO BOX 770702
MIAMI, FL 33177

New Principal Place of Business:

9780 E INDIGO STREET
202
PALMETTO BAY, FL 33157

New Mailing Address:

9780 E INDIGO STREET
202
PALMETTO BAY, FL 33157

FEI Number: 65-0865097 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

MEADE, ANGELIQUE PRES
8564 SW 210TH TERRACE
CUTLER BAY, FL 33189 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: P () Delete
Name: MEADE, ANGELIQUE PRES
Address: 8564 SW 210TH TERRACE
City-St-Zip: CUTLER BAY, FL 33189 US

Title: VP () Delete
Name: FRANCIS, EMANUEL VICE-P
Address: 10771 SW 173RD STREET
City-St-Zip: MIAMI, FL 33157 US

Title: SEC () Delete
Name: SPENCER, LISA SECRETA
Address: 26700 SW 138TH AVENUE
City-St-Zip: HOMESTEAD, FL 33032 US

Title: TREA () Delete
Name: MALONE, EARLENE TREASUR
Address: 22151 SW 92ND PLACE
City-St-Zip: CUTLER BAY,, FL 33157 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MEADE, ANGELIQUE PRES
Address: 8564 SW 210TH TER.
City-St-Zip: CUTLER BAY, FL 33189 US

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

Title: SEC (X) Change () Addition
Name: HUGHLEY, PATRICE SECRETA
Address: 7380 NW 4TH STREET #304
City-St-Zip: PLANTATION, FL 33317

Title: D/T (X) Change () Addition
Name: MATHIS, RICKEY DIR-TRE
Address: 9121 SW 184TH STREET
City-St-Zip: CUTLER BAY, FL 33157

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: ANGELIQUE B. MEADE

PRES

05/02/2009

Electronic Signature of Signing Officer or Director

_____ Date