

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006813

FILED
Jul 22, 2005
Secretary of State

Entity Name: LOVE, JOY, PEACE, INC.

Current Principal Place of Business:

4751 NW 155TH ST
TRENTON, FL 32693

New Principal Place of Business:

Current Mailing Address:

4751 NW 155TH ST
TRENTON, FL 32693

New Mailing Address:

FEI Number: 59-3547277 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:

LANGSTON, ROBERT A
4751 NW 155TH ST
TRENTON, FL 32693 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: ST () Delete
Name: LANGSTON, JOY
Address: 831 E. PARK AVE
City-St-Zip: CHIEFLAND, FL 32626

Title: D () Delete
Name: ARRINGTON, RANDY
Address: HWY 347
City-St-Zip: CHIEFLAND, FL 32644

Title: D () Delete
Name: HUDSON, TRAVIS
Address: 1402 NW 18TH AVE
City-St-Zip: CHIEFLAND, FL 32626

Title: D () Delete
Name: CASON, SAMMY
Address: 203 NE 3RD ST
City-St-Zip: CHIEFLAND, FL 32626

Title: D () Delete
Name: LAWRENCE, RICK
Address: 322 NE 4TH AVE
City-St-Zip: TRENTON, FL 32693

Title: D () Delete
Name: CLUBB, TONY
Address: 632 NE 2ND ST
City-St-Zip: WILLISTON, FL 32696

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOY M. LANGSTON

ST

07/22/2005

Electronic Signature of Signing Officer or Director

Date