

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2000 8:00 am
Secretary of State
04-24-2000 90073 044 ****61.25

DOCUMENT # N99000002107
Entity Name

OPERATION LINKING OUR VOLUNTEER EFFORTS (L.O.V.E)

Principal Place of Business Mailing Address
119 N LAKEVIEW AVE
GARDEN FL 34787 WINTER GARDEN FL 34787-2710

Principal Place of Business 3. Mailing Address
120 W. FLORAL ST. 120 W. FLORAL ST.
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Ocoee, FL Ocoee, FL
Zip Zip
34761 34761
Country Country
ORANGE ORANGE

4. FEI Number Applied For
59-3581550 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
ASMA, WILLIAM N
886 S DILLARD STREET
WINTER GARDEN FL 34787

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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, 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 Department of State

OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
D	STAMPER, BRYAN 1450 CITRUS AVE WINTER GARDEN FL 34787	D	BERGH, JOHAN PO BOX 757 GOTHA, FL 34734-0757
D	ARNOLD, LEWIS D 120 W FLORAL STREET WINTER GARDEN FL 34761-2621	D	OLTMAN, BERWYN 622 PALOMAS AVE. Ocoee, FL 34761
D	REEHER, JIM 315 W TILDEN AVE WINTER GARDEN FL 34787-2621	D	RUTHERFORD, TOM 260 N. WOODLAND ST. WINTER GARDEN, FL 34787
D	ULMER, JIM 2547 GREYWALL AVE OCOEE FL 34761		

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 SIGNATURE REQUIRED 1/26/2000 407-656-2471