

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005282

FILED
Apr 20, 2009
Secretary of State

Entity Name: LOVE JOY PAVILION OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

5643 CARDER RD
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

PO BOX 1826
ROCKINGHAM, NC 28380

New Mailing Address:

FEI Number: 59-3612597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROSS, ANITA
4437 KING COLE BLVD.
ORLANDO, FL 32811 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: ROSS, JAMES
Address: 157 HAYWOOD AVE
City-St-Zip: ROCKINGHAM, NC 28379

Title: S () Delete
Name: ADAMS, MARGARET A
Address: 3709 JOHNSON STREET
City-St-Zip: ORLANDO, FL 32805

Title: T () Delete
Name: COPELAND, ODESSA
Address: 242 AZALEA STREET
City-St-Zip: RAEFORD, NC 28326

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROSS, JAMES
Address: 1032 BATTLE DAIRY ROAD
City-St-Zip: ROCKINGHAM, NC 28379

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

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

Title: F () Change (X) Addition
Name: HOSKINS, DEBORAH
Address: 22661 HOYL CIRCLE
City-St-Zip: MAXTON, NC 28364

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: REVEREND JAMES ROSS

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date