

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006376

FILED
Apr 26, 2004
Secretary of State**Entity Name:** LOVING ARMS BY FAITH MINISTRIES, INC.**Current Principal Place of Business:**1820 NW 172 TERR
CAROL CITY, FL 33056**New Principal Place of Business:****Current Mailing Address:**1820 NW 172 TERR
CAROL CITY, FL 33056**New Mailing Address:****FEI Number:** 65-0958813**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LATIMORE, FAY MARIE
1820 NW 172ND TERR.
OPA LOCKA, FL 33056 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:** D () Delete
Name: LATIMORE, FAY MARIE
Address: 1820 NW 172ND TERR.
City-St-Zip: MIAMI, FL 33056**Title:** D () Delete
Name: KEMP, ANNIE KATE
Address: 2460 NW 168TH ST.
City-St-Zip: MIAMI, FL 33056**Title:** D () Delete
Name: LONG, KLAUTRELLE S
Address: 17300 NW 32ND AVE.
City-St-Zip: MIAMI, FL 33056**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:

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: FAY LATIMORE

D

04/26/2004

Electronic Signature of Signing Officer or Director_____
Date