

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007486

**FILED**  
**Apr 13, 2010**  
**Secretary of State**

**Entity Name:** LOVE FELLOWSHIP OUTREACH MINISTRIES, INC.

**Current Principal Place of Business:**

3972 WOODVILLE HWY  
TALLAHASSEE, FL 32305 US

**New Principal Place of Business:**

1401 BALBOA DRIVE  
TALLAHASSEE, FL 32305 US

**Current Mailing Address:**

1401 BALBOA DRIVE  
TALLAHASSEE, FL 32305 US

**New Mailing Address:**

PO BOX 6841  
TALLAHASSEE, FL 32314 US

**FEI Number:** 59-3633015

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

TAYLOR, DARFORD  
1401 BALBOA DRIVE  
TALLAHASSEE, FL 32305 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: PT  
Name: TAYLOR, DARFORD  
Address: 1401 BALBOA DRIVE  
City-St-Zip: TALLAHASSEE, FL 32305

Title: VTT  
Name: TAYLOR, CYNTHIA  
Address: 1401 BALBOA DRIVE  
City-St-Zip: TALLAHASSEE, FL 32305

Title: S  
Name: COX-PYE, RAMONA  
Address: 5789 JAPONICA COURT  
City-St-Zip: TALLAHASSEE, FL 32303

Title: AT  
Name: CAINE, YATA  
Address: 2366 TAMARIND COURT  
City-St-Zip: TALLAHASSEE, FL 32303

Title: T  
Name: PYE, SHAUN  
Address: 5789 JAPONICA COURT  
City-St-Zip: TALLAHASSEE, FL 32303

I hereby 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 all other like empowered.

SIGNATURE: YATA S. CAINE

AT

04/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date