

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000107200

FILED
Aug 28, 2008
Secretary of State

Entity Name: GENUINE LOVE ACADEMY INC

Current Principal Place of Business:

4871 NW 183RD STREET
MIAMI, FL 33055

New Principal Place of Business:

Current Mailing Address:

4871 NW 183RD STREET
MIAMI, FL 33055

New Mailing Address:

FEI Number: 26-1163950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, FRANCENIA
4871 NW 183RD STREET
MIAMI, FL 33055 US

Name and Address of New Registered Agent:

THOMPSON, CHARELLE
4871 NW 183RD STREET
MIAMI, FL 33055 US

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: CHARELLE N THOMPSON

08/28/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: THOMPSON, FRANCENIA
Address: 4871 NW 183RD STREET
City-St-Zip: MIAMI, FL 33055

Title: VP () Delete
Name: THOMPSON, CHARLES
Address: 4871 NW 183RD STREET
City-St-Zip: MIAMI, FL 33055

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: THOMPSON, FRANCENIA
Address: 4871 NW 183RD STREET
City-St-Zip: MIAMI, FL 33055

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

Title: P () Change (X) Addition
Name: GENUINE LOVE MINISTR, IES INTERNATIO N AL, INC
Address: 4855 NW 183RD STREET
City-St-Zip: MIAMI, FL 33055

Title: T () Change (X) Addition
Name: FREDERICK, MARIE
Address: 4855 NW 183RD STREET
City-St-Zip: MIAMI, FL 33055

Title: S () Change (X) Addition
Name: ROLLE, DENISE
Address: 4855 NW 183RD STREET
City-St-Zip: MIAMI, FL 33055

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES W THOMPSON

VP

08/28/2008

Electronic Signature of Signing Officer or Director

Date