

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000057191

Entity Name: FORTRESS OF LOVE INC.

**FILED**  
**Feb 10, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

2455 CRAIN COURT  
SAINT CLOUD, FL 34771

## **New Principal Place of Business:**

2455 CRANE COURT  
SAINT CLOUD, FL 34771

## **Current Mailing Address:**

PO BOX 701343  
SAINT CLOUD, F; 34770

## **New Mailing Address:**

FEI Number: 27-0499969

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GONZALEZ, ANNETTE  
2455 CRANE COURT  
SAINT CLOUD, FL 34771 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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: P  
Name: GONZALEZ, ANNETTE  
Address: 2455 CRANE COURT  
City-St-Zip: SAINT CLOUD, FL 34771

Title: VP  
Name: ALVARADO, RAFAEL  
Address: 2455 CRANE COURT  
City-St-Zip: SAINT CLOUD, FL 34771

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

SIGNATURE: ANNETTE GONZALEZ

P

02/10/2010

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

\_\_\_\_\_  
Date