

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2008
Secretary of State

DOCUMENT# N05000003120

Entity Name: AGAPE CHRISTIAN CENTER DELIVERANCE MINISTRIES, INC.

Current Principal Place of Business:

327 CEDAR AVENUE
B&C
NICEVILLE, FL 32578

New Principal Place of Business:

1097 TEXAS PARKWAY
CRESTVIEW, FL 32536

Current Mailing Address:

202 22ND STREET
NICEVILLE,, FL 32578

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SUTTON, SEQUEDA E
202 22ND STREET
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

SUTTON, SEQUEDA E
1097 TEXAS PARKWAY
CRESTVIEW, FL 32536 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: _____ 03/14/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SUTTON, SEQUEDA E
Address: 202 22ND STREET
City-St-Zip: NICEVILLE, FL 32578

Title: P () Delete
Name: SUTTON, JAMES A ASST. P
Address: 202 22ND STREET
City-St-Zip: NICEVILLE, FL 32587

Title: M () Delete
Name: HINES, LAQUEENA
Address: 426 APPLE DRIVE
City-St-Zip: CRESTVIEW, FL 32539

Title: S () Delete
Name: COBB-SHEFFIELD, CLAUDINE
Address: 306 SIMS RD
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: C () Delete
Name: WILLIAMSON, PAUL JR
Address: 77 BEAL PKWY
City-St-Zip: FORT WALTON BEACH, FL 32548

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SUTTON, SEQUEDA E
Address: 1097 TEXAS PARKWAY
City-St-Zip: CRESTVIEW, FL 32536

Title: P (X) Change () Addition
Name: SUTTON, JAMES A ASST. P
Address: 1097 TEXAS PARKWAY
City-St-Zip: CRESTVIEW, FL 32536

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

Title: S (X) Change () Addition
Name: SHEPHERD, DANITA
Address: 591 WINGSPANG WAY
City-St-Zip: CRESTVIEW, FL 32536

Title: C (X) Change () Addition
Name: POPE, MALCOM
Address: 1259 WOOD IRIS LANE
City-St-Zip: LAWRENCEVILLE, GA 30045

Title: S () Change (X) Addition
Name: COBB, CLAUDEEN
Address: 306 SIMS RD
City-St-Zip: FORT WALTON BEACH, FL 32547

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: SEQUEDA E. SUTTON P 03/14/2008
Electronic Signature of Signing Officer or Director Date