## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000007749

FILED Apr 30, 2008 Secretary of State

Entity Name: AGAPE EDUCATIONAL MEDIA, INC

Current Principal Place of Business:			New Principal Place of Business:	
1120 BLAG BAKER, F	CKBERRY CIR L 32531	CLE		
Current Mailing Address:			New Mailing Address:	
1120 BLAG BAKER, F	CKBERRY CIR L 32531	CCLE		
FEI Number	: 26-0672612	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	l Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:
BAKER, F	CKBERRY CIR L 32531 US	5	purpose of changing its register	ed office or registered agent, or both,
SIGNATU	RE:			
	Electron	nic Signature of Registered Ag	ent	Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
T: (1				
Name: Address:	RIDDICK, DAL 1120 BLACKBI	ERRY CIRCLE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Name: Address: City-St-Zip: Title: Name: Address:	RIDDICK, DAL 1120 BLACKBI BAKER, FL 32 S, D ( PETERSON, K 6467 ARBOR L	E ERRY CIRCLE :531 ) Delete EVIN ANE	Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	RIDDICK, DAL 1120 BLACKBI BAKER, FL 32 S, D ( PETERSON, K 6467 ARBOR L GULF BREEZE T, D ( STEELMAN, LA 3074 KILLARN	E ERRY CIRCLE 531 ) Delete EVIN ANE E, FL 32563 ) Delete AWRENCE E EY DRIVE	Name: Address: City-St-Zip: Title: Name: Address:	
Title: Name: Address: City-St-Zip: City-St-Zip:	RIDDICK, DAL 1120 BLACKBI BAKER, FL 32 S, D ( PETERSON, K 6467 ARBOR L GULF BREEZE T, D ( STEELMAN, LA 3074 KILLARN PACE, FL 325	E ERRY CIRCLE (531)  ) Delete EVIN (ANE E, FL 32563)  ) Delete AWRENCE E EY DRIVE 31  ) Delete	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	()Change()Addition

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: DALE R RIDDICK PRES 04/30/2008