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FILED

Feb 06 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N93000001346 (6)

1. Corporation Name

AGAPE HOUSE MINISTRY, INC.



Principal Place of Business

Mailing Address

710 S BAY ST  
EUSTIS FL 32726  
US

PO BOX 975  
EUSTIS FL 32727  
US

3. Date Incorporated or Qualified

03/19/1993

4. FEI Number

59-3221095

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☐ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOLDER, RON  
37421 MYRTLE DR  
UMATILLA FL 32784

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME NAPPER, JAMES  
STREET ADDRESS 230 FROSTI WAY  
CITY-ST-ZIP EUSTIS FL

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME BUTTERFIELD, ELAINE  
STREET ADDRESS 751 OLD MT DORA ROAD  
CITY-ST-ZIP EUSTIS FL

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE DS ☐ DELETE  
NAME GERKEN, OSCAR  
STREET ADDRESS 1607 ALAN DRIVE  
CITY-ST-ZIP EUSTIS FL

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE DP ☐ DELETE  
NAME HOLDER, RON  
STREET ADDRESS 37421 MYRTLE DRIVE  
CITY-ST-ZIP UMATILLA FL

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE D ☒ DELETE  
NAME RANDOLPH, DAVID  
STREET ADDRESS 2815 S. BAY STREET  
CITY-ST-ZIP EUSTIS FL

5.1 TITLE ☐ Change ☒ Addition  
5.2 NAME T  
5.3 STREET ADDRESS Cindy Glienke  
5.4 CITY-ST-ZIP 806 Hill Street  
Eustis, Florida

TITLE T ☐ DELETE  
NAME WERKHEISER, KEVIN  
STREET ADDRESS 21 NORTH GROVE STREET  
CITY-ST-ZIP EUSTIS FL

6.1 TITLE ☒ Change ☐ Addition  
6.2 NAME D  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ronald Holder RONALD HOLDER 1-26-98 352-357-0048

CR2E037 (10/97)