

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 05, 2004
Secretary of State**

DOCUMENT# N01000007422

Entity Name: AGAPA OUTREACH, INC.

Current Principal Place of Business:

5038 N. SOCRUM LOOP RD.
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

5038 N. SOCRUM LOOP RD.
LAKELAND, FL 33809

New Mailing Address:

FEI Number: 04-3614613 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, LARRY J
5038 N. SOCRUM LOOP RD.
LAKELAND, FL 33809 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANDERSON, LARRY J
Address: 5038 N. SOCRUM LOOP RD.
City-St-Zip: LAKELAND, FL 33809

Title: VD () Delete
Name: SHAW, EDWARD L
Address: 4606 ALPINE DR.
City-St-Zip: LAKELAND, FL 33801

Title: SD () Delete
Name: THORPE, CHARLES T
Address: 1105 O'DONIEL LOOP SOUTH
City-St-Zip: LAKELAND, FL 33809

Title: TD () Delete
Name: HOHL, RICHARD E JR.
Address: 3855 GARNET DR.
City-St-Zip: MULBERRY, FL 33860

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LARRY J. ANDERSON

PD

02/05/2004

Electronic Signature of Signing Officer or Director

Date