## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9700000158

Entity Name: AGAPE HOME, INC.

Feb 28, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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3 AVENUE J

MOORE HAVEN, FL 33471

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 1253

MOORE HAVEN, FL 33471

FEI Number: 65-0721743 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TUEL, DEBORAH A 3 AVÉNUE J

MOORE HAVEN, FL 33471 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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

COUSE, MILLER Name: Address: 227 E. CRESCENT DR. City-St-Zip: CLEWISTON, FL 33440

Title: SD

Name: COUSE, TONI Address: 227 E. CRESCENT DR. City-St-Zip: CLEWISTON, FL 33440

Title: PD

TUEL, DEBORAH A Name:

Address: 3 AVE J

City-St-Zip: MOORE HAVEN, FL 33471

Title:

Name: FORBES, JANICE 201 W. DELMONTE AVE. Address: City-St-Zip: CLEWISTON, FL 33440

Title: VD

FORBES, JIM DOCTOR Name: 201 W DELMONTE AVE Address: City-St-Zip: CLEWISTON, FL 33440

Title:

MERCER, DAVID PASTOR Name:

Address: 499 AVENUE N

MOORE HAVEN, FL 33471 City-St-Zip:

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

SIGNATURE: DEBORAH A. TUEL PD 02/28/2011