2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9200000052

FILED Apr 30, 2011 Secretary of State

Entity Name: SMITH CHAPEL APOSTOLIC CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

2540 FL GA HIGHWAY 3111-20 MAHAN DR

HAVANA, FL 32333 US 104

TALLAHASSEE, FL 32308 US

Current Mailing Address: New Mailing Address:

2540 FL GA HIGHWAY 3111-20 MAHAN DR

HAVANA, FL 32333 US 104

TALLAHASSEE, FL 32308 US

FEI Number: 59-3152244 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:

JOHNSON, ABE DR 4085 BOTHWELL TERR

TALLAHASSEE, FL 32317 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PMD

 Name:
 JOHNSON, ABE DR.

 Address:
 4085 BOTHWELL TERR

 City-St-Zip:
 TALLAHASSEE, FL 32317 US

Title: TD

 Name:
 JOHNSON, MITTIE P DR.

 Address:
 4085 BOTHWELL TERR

 City-St-Zip:
 TALLAHASSEE, FL 32317 US

Title:

Name: SMITH CHAPEL BIBLE UNIVERSITY, INC.

Address: 3111-20 MAHAN DR # 104 City-St-Zip: TALLAHASSEE, FL 32308

Title: D

Name: SPRADLEY, CEDRIC DR.
Address: 682 MILLWOOD DRIVE
City-St-Zip: HAVANA, FL 32333

Title: D

Name: EDUCATION BASED CONSULTANTS OF AMERICA LLC

Address: 2540 FL GA HIGHWAY City-St-Zip: HAVANA, FL 32333 US

Title: VPD

Name: BUSH, THOMAS A DR. Address: 4200 RED OAK DR.

City-St-Zip: TALLAHASSEE, FL 32311 US

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: DR ABE JOHNSON PMD 04/30/2011

Electronic Signature of Signing Officer or Director

Date