

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720971

Entity Name: APOSTOLIC EVANGELISTIC ASSOCIATION, INC.**Current Principal Place of Business:**6702 N.W. 15TH AVE.
MIAMI, FL 33147**Current Mailing Address:**6702 N.W. 15TH AVE.
MIAMI, FL 33147**FEI Number:** 23-7160177**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SMITH, DR. GILBERT S.
6702 NW 15TH AVENUE
MIAMI, FL 33147 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**Officer/Director Detail :**

Title	PD
Name	SMITH, GILBERT SDR.
Address	12705 N.E. 4TH AVE.
City-State-Zip:	N. MIAMI FL

Title	D
Name	ALLEN, MICHAEL DEC
Address	490 NW 45 AVE
City-State-Zip:	PLANTATION FL 33317

Title	VPD
Name	SMITH, GENEVA OSIS
Address	12705 N.E. 4TH AVE.
City-State-Zip:	N. MIAMI FL

Title	STD
Name	LITTLE, TALESIA
Address	1458 NW 99TH ST
City-State-Zip:	MIAMI FL 33147

Title	D
Name	JOHNSON, BETTY SIS
Address	3470 NW 176 ST.
City-State-Zip:	MIAMI FL 33056

Title	D
Name	FERGUSON, SHARON
Address	6702 NW 15TH AVE
City-State-Zip:	MIAMI FL 33147

Title	DIRECTOR
Name	JONES, WILLIE
Address	6702 N.W. 15TH AVE.
City-State-Zip:	MIAMI FL 33147

Title	DEACON
Name	ADAMS, STEVE
Address	6702 N.W. 15TH AVE.
City-State-Zip:	MIAMI FL 33147

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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: TALESIA LITTLE**SECRETARY****03/30/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DEACON
Name JOHNSON, JERRY
Address 6702 N.W. 15TH AVE.
City-State-Zip: MIAMI FL 33147

Title DIRECTOR
Name LITTLE, LEE JR.
Address 6702 N.W. 15TH AVE.
City-State-Zip: MIAMI FL 33147

Title DIRECTOR
Name ANGLIN, ANNIE
Address 19624 NW 32ND CT
City-State-Zip: MIAMI FL 33056