

2017 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 VPD
Name SMITH, GENEVA OSIS
Address 12705 N.E. 4TH AVE.
City-State-Zip: N. MIAMI FL

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

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

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

Title STD
Name LITTLE, TALESIA
Address 1458 NW 99TH ST
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 JOHNSON, JERRY
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

SDT

04/10/2017

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

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

Title ELDER
Name NUNNALLY, AMOS
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 NUNNALLY, JACQUELINE
Address 6702 N.W. 15TH AVE.
City-State-Zip: MIAMI FL 33147