

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007749

Entity Name: AGAPE EDUCATIONAL MEDIA, INC.**Current Principal Place of Business:**4000 HWY 90, SUITE F
PACE, FL 32571**Current Mailing Address:**4000 HWY 90, SUITE F
PACE, FL 32571 US**FEI Number:** 26-0672612**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STEELMAN, LAWRENCE
4000 HIGHWAY 90
SUITE F
PACE, FL 32571 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:** LAWRENCE STEELMAN

03/21/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P, D
Name STEELMAN, LAWRENCE E
Address 5581 OAKMONT DR
City-State-Zip: PACE FL 32571

Title V, D
Name PETERSON, KEVIN
Address 6467 ARBOR LANE
City-State-Zip: GULF BREEZE FL 32563

Title D
Name LONG, LISA
Address 2770 OLD CHEMSTRAND RD
City-State-Zip: CANTONMENT FL 32533

Title S, T, DIRECTOR
Name RIDDICK, SANDRA
Address 4649 BRIAROAK DR.
City-State-Zip: PACE FL 32571

Title D
Name TAYLOR, BOBBY
Address 6609 ALLISON WAY
City-State-Zip: PACE FL 32571

Title DIRECTOR
Name MCMATH, JEREMY
Address 17285 NORTHDROP LANE
City-State-Zip: ANDALUSIA AL 36420

Title DIRECTOR
Name HAWSEY, JERRY
Address 1311 KEEGO ROAD
City-State-Zip: BREWTON AL 36426

Title DIRECTOR
Name TONJA, WARD
Address 3768 LONGFELLOW ROAD
City-State-Zip: TALLAHASSEE FL 32311

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: STEELMAN, LAWRENCE E

PRESIDENT

03/21/2020

Electronic Signature of Signing Officer/Director Detail

Date