

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000004676

Entity Name: AGAPE CHURCH INC**Current Principal Place of Business:**4312 SOUTH BEND CIRCLE W
JACKSONVILLE, FL 32207**Current Mailing Address:**PO BOX 47694
JACKSONVILLE, FL 32247 US**FEI Number:** 45-5145808**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LIAN, KHUAL D
1873 BURKHOLDER CIR E
JACKSONVILLE, FL 32216 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:** KHUAL DEIH LIAN

02/14/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name KHAI, THA
Address 2633 GAILLARDIA RD
City-State-Zip: JACKSONVILLE FL 32211

Title SEC
Name LIA, KHAI M
Address 5520 HICKSON RD
City-State-Zip: JACKSONVILLE FL 32207

Title PASTOR
Name LIAN, KHUAL D
Address 1873 BURKHOLDER CIR E
City-State-Zip: JACKSONVILLE FL 32216

Title TREASURER
Name KAMPI, TZ SUAN
Address 5124 ROSEBAY TER TD
 K 71
City-State-Zip: JACKSONVILLE FL 32207

Title YOUTH TREASURER
Name KIM, THANG T
Address 6834 EAST RD
City-State-Zip: JACKSONVILLE FL 32216

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: KHUAL DEIH LIAN

PASTOR

02/14/2018

Electronic Signature of Signing Officer/Director Detail

Date