Entity Name: THE APOSTOLIC CHURCH OF JESUS OF FELLOWSHIP	
MINIŚTRIES, INC.	

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

444 FORD DRIVE ALTAMONTE SPRINGS, FL 32701

DOCUMENT# N1500002512

### **Current Mailing Address:**

444 FORD DRIVE ALTAMONTE SPRINGS, FL 32701

## FEI Number: 81-1461085

#### Name and Address of Current Registered Agent:

111 BOULDER COURT

City-State-Zip: SANFORD FL 32717

ROLLE, APOSTLE P SR. 444 FORD DRIVE ALTAMONTE SPRINGS, FL 32701 US FILED Feb 10, 2017 Secretary of State CC1141104116

Certificate of Status Desired: No

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:

Address

Electronic Signature of Registered Agent

# Officer/Director Detail :

Title	DP	Title	GS
Name	ROLLE, APOSTLE P SR.	Name	ROLLE, JAMES SR.
Address	444 FORD DRIVE	Address	1853 BETHEL LANE
City-State-Zip:	ALTAMONTE SPRINGS FL 32701	City-State-Zip:	ORLANDO FL 32811
Title	DS	Title	D
Name	WILSON, ELEANOR CLERK	Name	LANCEFIELD, ROSE
Address	400 BASWEOOD LANE	Address	452 FORD DRIVE
City-State-Zip:	ALTAMONTE SPRINGS FL 32701	City-State-Zip:	ALTAMONTE SPRINGS FL 32701
Title	D	Title	GS
Name	OLIVER, BETTY	Name	ROLLE, JAMES SR.
Address	116 SPRING STREET	Address	1853 BETHEL LANE
City-State-Zip:	ALTAMONTE SPRINGS FL 32701	City-State-Zip:	ORLANDO FL 32811
Title	TRUSTEE		
Name	BEACHAM, KENT		
	Name Address City-State-Zip: Title Name Address City-State-Zip: Name Address City-State-Zip:	NameROLLE, APOSTLE P SR.Address444 FORD DRIVECity-State-Zip:ALTAMONTE SPRINGS FL 32701TitleDSNameWILSON, ELEANOR CLERKAddress400 BASWEOOD LANECity-State-Zip:ALTAMONTE SPRINGS FL 32701TitleDNameOLIVER, BETTYAddress116 SPRING STREETCity-State-Zip:ALTAMONTE SPRINGS FL 32701TitleDNameOLIVER, BETTYAddress116 SPRING STREETCity-State-Zip:ALTAMONTE SPRINGS FL 32701TitleTITAMONTE SPRINGS FL 32701	NameROLLE, APOSTLE P SR.NameAddress444 FORD DRIVEAddressCity-State-Zip:ALTAMONTE SPRINGS FL 32701City-State-Zip:TitleDSTitleNameWILSON, ELEANOR CLERKNameAddress400 BASWEOOD LANEAddressCity-State-Zip:ALTAMONTE SPRINGS FL 32701City-State-Zip:TitleDTitleNameALTAMONTE SPRINGS FL 32701City-State-Zip:TitleDTitleNameOLIVER, BETTYNameAddress116 SPRING STREETAddressCity-State-Zip:ALTAMONTE SPRINGS FL 32701City-State-Zip:TitleDTitleNameAddressCity-State-Zip:TitleDCity-State-Zip:Address116 SPRING STREETAddressCity-State-Zip:ALTAMONTE SPRINGS FL 32701City-State-Zip:TitleTITUETITUECity-State-Zip:TitleCity-State-Zip:City-State-Zip:TitleSCity-State-Zip:TitleTITUESCity-State-Zip:City-State-Zip:TitleTITUESTitleTITUETitleTITUETitleTITUETitleTITUETitleTITUETitleTITUETitleTITUETitleTITUETitleTITUETitleTITUETitleTITUETitleTITUETitleTITUE

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: ELEANOR WILSON	CLERK	02/10/2017

Electronic Signature of Signing Officer/Director Detail

Date