

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000001972

Entity Name: AGAPE UNITED WORSHIP CENTER, INC.

Current Principal Place of Business:

6079 SPRING ISLES BLVD
LAKE WORTH, FL 33463

Current Mailing Address:

6079 SPRING ISLES BLVD
LAKE WORTH, FL 33463

FEI Number: 84-4853892

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COICOU, NAHUM
6079 SPRING ISLES BLVD
LAKE WORTH, FL 33463 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 PASTOR
Name DORCIN, LOUISNY
Address 424 SW 9TH AVE
City-State-Zip: BOYNTON BEACH FL 33435

Title CHURCH ADMINISTRATOR
Name DIEUJUSTE, RONSARD
Address 5730 LAKE GEORGE PLACE
City-State-Zip: LAKE WORTH FL 33463

Title SECRETARY
Name SAINT-JUSTE, DIEULIMENE
Address 1352 S.E FLEMING WAY
City-State-Zip: STUART FL 34997

Title TREA
Name LOUIS, ST THELUS
Address 7328 WILLOW SPRINGS CIRCLE
SOUTH
City-State-Zip: BOYNTON BEACH FL 33436

Title DIRECTOR
Name NAHUM, COICOU
Address 6079 SPRING ISLES
City-State-Zip: LAKE WORTH FL 33463

Title ASST. TREASURER
Name VALEUS, MINOUCHE
Address 1247 BAYCOUT ISLE
City-State-Zip: GREENACRES FL 33413

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: NAHUM COICOU

DIRECTOR

04/10/2022

Electronic Signature of Signing Officer/Director Detail

Date