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: DR. ABE JOHNSON

Electronic Signature of Signing Officer/Director Detail

TRUSTEE/CHAIR

04/29/2014

Entity Name: SMITH CHAPEL APOSTOLIC CHURCH, INC.

Current Principal Place of Business:

3111 MAHAN DR STE 20 104 TALLAHASSEE, FL 32308

Current Mailing Address:

3111 MAHAN DR STE 20 104 TALLAHASSEE, FL 32308 US

FEI Number: 59-3152244

Name and Address of Current Registered Agent:

JOHNSON, ABE DR 4085 BOTHWELL TERR TALLAHASSEE, FL 32317 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

Officer/Director Detail :

Title	PMD	Title	TD
Name	JOHNSON, ABE DR.	Name	JOHNSON, MITTIE PDR.
Address	4085 BOTHWELL TERR	Address	4085 BOTHWELL TERR
City-State-Zip:	TALLAHASSEE FL 32317	City-State-Zip:	TALLAHASSEE FL 32317
Title	D	Title	VPD
Title Name	D SPRADLEY, CEDRIC DR.	Title Name	VPD BUSH, THOMAS ADR.
	-		

Certificate of Status Desired: No

FILED Apr 29, 2014 Secretary of State CC7535387709

Date

Date