

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001346

Entity Name: AGAPE HOUSE MINISTRY, INC.**Current Principal Place of Business:**MAGNOLIA AVENUE
EUSTIS, FL 32726**Current Mailing Address:**315 E. ORANGE AVE.
EUSTIS, FL 32726 US**FEI Number:** 59-3221095**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**VANHASSEL, GEORGE
35132 CR 439
EUSTIS, FL 32726 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:** GEORGE VANHASSEL

03/26/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	VAN HASSEL, GEORGE
Address	351325 CR 439
City-State-Zip:	EUSTIS FL 32726
Title	SECRETARY/TREASURER
Name	FERGUSON, LOREEN DORIS
Address	2546 POTOMAC PATH
City-State-Zip:	GRAND ISLAND FL 32735
Title	DIRECTOR
Name	FUKUI, SHIRLEY
Address	1020 LAKE DRIVE
City-State-Zip:	GRAND ISLAND FL 32735
Title	DIRECTOR
Name	MCDOWALL, RODGER
Address	2153 UPPER RED LAKE
City-State-Zip:	GRAND ISLAND FL 32735

Title	DIRECTOR
Name	GREEN, CHERYL
Address	315 E. ORANGE AVE.
City-State-Zip:	EUSTIS FL 32726
Title	DIRECTOR
Name	WHIPPLE, PATRICIA
Address	1355 HUDSON WAY
City-State-Zip:	GRAND ISLAND FL 32735
Title	VC
Name	IRVING, JAMES
Address	315 E ORANGE AVE
City-State-Zip:	EUSTIS FL 32726
Title	DIRECTOR
Name	REPASS, LOUISE
Address	315 E ORANGE AVE
City-State-Zip:	EUSTIS FL 32726

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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: LOREEN DORIS FERGUSON**SECRETARY/TREASURER** 03/26/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	REPASS, MICHAEL
Address	315 E ORANGE AVE
City-State-Zip:	EUSTIS FL 32726