

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000000158

**Entity Name:** AGAPE HOME, INC.

**Current Principal Place of Business:**

3 AVENUE J  
MOORE HAVEN, FL 33471

**Current Mailing Address:**

P.O. BOX 1253  
MOORE HAVEN, FL 33471

**FEI Number: 65-0721743**

**Certificate of Status Desired: No**

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

TUEL, DEBORAH A  
3 AVENUE J  
MOORE HAVEN, FL 33471 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 D  
Name COUSE, MILLER  
Address 227 E. CRESCENT DR.  
City-State-Zip: CLEWISTON FL 33440

Title SD  
Name COUSE, TONI  
Address 227 E. CRESCENT DR.  
City-State-Zip: CLEWISTON FL 33440

Title PD  
Name TUEL, DEBORAH A  
Address P.O. BOX 1253  
City-State-Zip: MOORE HAVEN FL 33471

Title D  
Name FORBES, JANICE  
Address 201 W. DELMONTE AVE.  
City-State-Zip: CLEWISTON FL 33440

Title VD  
Name DRIGGERS, KELVIN  
Address 1361 WAGON TRAIL  
City-State-Zip: MOORE HAVEN FL 33471

Title D  
Name MERCER, DAVID PASTOR  
Address 499 AVENUE N  
City-State-Zip: MOORE HAVEN FL 33471

*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: DEBORAH A. TUEL**

**PD**

**01/26/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date