2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#716016

FILED Jan 03, 2007 Secretary of State

Entity Name: UPPER ROOM APOSTOLIC CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 5804 VERMONT AVENUE NEW PORT RICHEY, FL 34652 **Current Mailing Address: New Mailing Address:** 5804 VERMONT AVENUE NEW PORT RICHEY, FL 34652 FEI Number: 59-2272142 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUBA, MARK T 1833 PEPPERELL DR NEW PORT RICHEY, FL 34655 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PCD () Delete () Change () Addition HUBA, MARK T (TRUSTE, E) Name: Name: 1833 PEPPERELL DR. Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: Title: VD () Delete Title: () Change () Addition STRUKEL, PHILLIP Name: Name: Address: 7653 MONTAGUE LOOP Address: City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: Title: STD () Delete Title: () Change () Addition JOHNSON, TAMRA Name: Name: Address: 15518 RENEE LANE Address: City-St-Zip: HUDSON, FL 34669 City-St-Zip: Title: () Delete Title: () Change () Addition Name: LAWSON, EDWARD Name: 1104 NORTHRIDGE DR. Address: Address: City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: Title: () Delete Title: () Change () Addition BALDRIDGE, RONALD Name: Name: Address: 5834 1ST AVE Address: NEW PORT RICHEY, FL 34652 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARK T. HUBA PCD 01/03/2007