

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90219 040 ****70.00

DOCUMENT # 720971

1. Entity Name
APOSTOLIC EVANGELISTIC ASSOCIATION, INC.



Principal Place of Business
**6702 N.W. 15TH AVE.
MIAMI, FL 33147**

Mailing Address
**6702 N.W. 15TH AVE.
MIAMI, FL 33147**

14006561



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04262005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
23-7160177

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMITH, DR. GILBERT S.
6702 NW 15TH AVENUE
MIAMI, FL 33147**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME SMITH, GILBERT S DR.
STREET ADDRESS 12705 N.E. 4TH AVE.
CITY-ST-ZIP N. MIAMI, FL

TITLE D ☐ Change ☒ Addition
NAME Sharon Ferguson
STREET ADDRESS 6702 NW 15th Ave.
CITY-ST-ZIP Miami, FL 33147

TITLE D ☐ Delete
NAME SMITH, TOMMIE L ELDER
STREET ADDRESS 475 NW 89TH ST.
CITY-ST-ZIP MIAMI, FL 33150

TITLE D ☐ Change ☒ Addition
NAME Annie Anglin
STREET ADDRESS 6702 NW 15th Ave.
CITY-ST-ZIP Miami, FL 33147

TITLE D ☐ Delete
NAME ALLEN, MICHAEL DEC
STREET ADDRESS 490 NW 45 AVE
CITY-ST-ZIP PLANTATION, FL 33317

TITLE D ☐ Change ☒ Addition
NAME Steve Adams
STREET ADDRESS 6702 NW 15th Ave.
CITY-ST-ZIP Miami, FL 33147

TITLE VPD ☐ Delete
NAME SMITH, GENEVA O SIS
STREET ADDRESS 12705 N.E. 4TH AVE.
CITY-ST-ZIP N. MIAMI, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☐ Delete
NAME LITTLE, TALESA SIS
STREET ADDRESS 1458 NW 99TH CT
CITY-ST-ZIP MIAMI, FL 33147

TITLE STD ☒ Change ☐ Addition
NAME Little, Talesia
STREET ADDRESS 1458 NW 99th St.
CITY-ST-ZIP Miami, FL 33147

TITLE D ☐ Delete
NAME JOHNSON, BETTY SIS
STREET ADDRESS 3470 NW 176 ST.
CITY-ST-ZIP MIAMI, FL 33056

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gilbert S. Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 28, 2005 (305) 891-3570

Date Daytime Phone #