

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725884

FILED
Apr 09, 2009
Secretary of State

Entity Name: THE FIRST APOSTOLIC CHURCH, INC.

Current Principal Place of Business:

5574 HWY 90
MILTON, FL 32572 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 886
(PACE) MILTON, FL 32572 US

New Mailing Address:

FEI Number: 59-2547102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEBB, LARRY E
5659 BOOKER ST
MILTON, FL 32570 US

Name and Address of New Registered Agent:

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:

Title: TD () Delete
Name: HUNT, DUDLEY
Address: 6086 SUNNYRIDGE DR.
City-St-Zip: MILTON, FL 32570

Title: TD () Delete
Name: CAMERON, JERRY
Address: RT. 5, BOX 187
City-St-Zip: MILTON, FL 32570

Title: TD () Delete
Name: HARRISON, ROY H BRO
Address: 201 CEDAR ST.
City-St-Zip: MILTON, FL

Title: ST () Delete
Name: PECK, TRACI
Address: 2 SHADY LANE
City-St-Zip: MILTON, FL 32570

Title: TD () Delete
Name: MANNING, ALLEN
Address: 8540 HWY 97A
City-St-Zip: WALNUT HILL, FL 32568

Title: TD () Delete
Name: LEE, BILLY
Address: 777 OLD HWY 90
City-St-Zip: MILTON, FL 32570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TRACI L PECK

SECR

04/09/2009

Electronic Signature of Signing Officer or Director

Date