


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 750377
 1. Entity Name
AMERICA'S PROPHECY CRUSADE, INC.



Principal Place of Business
1225 MARTY BLVD.
ALTAMONTE SPRGS, FL 32714

Mailing Address
1225 MARTY BLVD.
ALTAMONTE SPRGS, FL 32714

DO NOT WRITE IN THIS SPACE



01032006 No Chg-NP CR2E037 (11/05)

| | |
|-----------------------------------------------------------|---------------------------------------|
| 4. FEI Number 59-1960419 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent
BROWNLOW, HARMON
1225 MARTY BLVD.
ALTAMONTE SPRGS, FL 32714

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|------------------------------------------------|----------------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD BROWNLOW, HARMON 1225 MARTY BLVD. ALTAMONTE SPRGS, FL 32714 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD BROWNLOW, JOSEPH H. 1225 MARTY BLVD. ALTAMONTE SPRGS, FL 32714 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD BROWNLOW, MARGARET 1225 MARTY BLVD. ALTAMONTE SPRGS, FL 32714 |
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 02/23/06-80055-019 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Margaret Brownlow Margaret Brownlow 2/10/06 407-862-5710
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #