

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008 8:00 am
Secretary of State

01-24-2008 90047 031 ****61.25

DOCUMENT # 756810 1. Entity Name AGAPE FLIGHTS, INC.					
Principal Place of Business 100 AIRPORT AVE VENICE, FL 34285 US			Mailing Address 100 AIRPORT AVE VENICE, FL 34285 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2057436	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent GARDNER, CHARLES I. 20532 CAPELLO DR. VENICE, FL 34292					
7. Name and Address of New Registered Agent 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, 2008		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 VP NAME MCANINCH, ARTHUR STREET ADDRESS 6003 39TH AVENUE WEST CITY-STATE-ZIP BRADENTON, FL 34209	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE PD NAME JONES, ROBERT STREET ADDRESS 1120 26TH ST W CITY-STATE-ZIP BRADENTON, FL 34205	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE T NAME VAN DER WEERT, RONALD STREET ADDRESS 11412 SUMMIT ROCK COURT CITY-STATE-ZIP PARRISH, FL 34219	☒ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE D NAME LAYTON, MICHAEL STREET ADDRESS 6548 BOWLINE DR CITY-STATE-ZIP SARASOTA, FL 34231	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE D NAME DARNELL, CYNTHIA STREET ADDRESS 4119 ROBERTS PT CITY-STATE-ZIP SARASOTA, FL 34242	☒ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
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 this 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 that person is an officer or director, receiver or trustee, or an agent, with or without other like empowered.					
SIGNATURE: <u>Robert L. Jones</u> President Robert L. Jones SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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