

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 21, 2008
Secretary of State

DOCUMENT# 760685

Entity Name: AGAPE UNITED CHURCH OF GOD, INC.**Current Principal Place of Business:**2988 CORTEZ LANE
DELRAY BEACH, FL 33445 US**New Principal Place of Business:****Current Mailing Address:**C/O ARNOLD THOMPSON
2988 CORTEZ LANE
DELRAY BEACH, FL 33445**New Mailing Address:****FEI Number:** 59-2159730**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**THOMPSON, ARNOLD
2988 CORTEZ LN
DELRAY BEACH, FL 33445 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:** PD () Delete
Name: THOMPSON, ARNOLD,
Address: 2988 CORTEZ LANE
City-St-Zip: DELRAY BEACH, FL**Title:** V (X) Delete
Name: DIEUJUSTE, JEAN REMUS REV
Address: 2 SOUTHERN CROSS LANE
City-St-Zip: BOYNTON BEACH, FL 33436**Title:** SD () Delete
Name: THOMPSON, JUNIE,
Address: 2988 CORTEZ LANE
City-St-Zip: DELRAY BCH., FL**Title:** TD () Delete
Name: LEWIS, PEREEDER
Address: 111 NE 19TH AVE
City-St-Zip: BOYNTON BEACH, FL 33435**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:

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: JUNIE THOMPSON

SD

11/21/2008

Electronic Signature of Signing Officer or Director

Date