

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 12, 2009**  
**Secretary of State**

DOCUMENT# 761665

**Entity Name:** THE APOSTOLIC CHURCH OF JESUS CHRIST OF BELLE GLADE, INC.**Current Principal Place of Business:**1316 WEST CANAL STREET, SOUTH  
BELLE GLADE, FL 33430 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 882  
BELLE GLADE, FL 33430**New Mailing Address:****FEI Number:** 59-2261822**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**FELD, JOSEPH P  
864 SE 4TH ST.  
BELLE GLADE, FL 33430 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: VD ( ) Delete  
Name: URSHAN, JACQUELINE F  
Address: 6923 OLD WHISKEY CREEK DRIVE  
City-St-Zip: FORT MYERS, FL 33919

Title: STD ( ) Delete  
Name: FELD, JOY M  
Address: 864 SE 4TH ST.  
City-St-Zip: BELLE GLADE, FL 33430

Title: PD ( ) Delete  
Name: FELD, JOSEPH P  
Address: 864 SE 4TH ST.  
City-St-Zip: BELLE GLADE, FL 33430

Title: D (X) Delete  
Name: FELD, JAMES E  
Address: 1862 WALDORF DRIVE  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D (X) Delete  
Name: URSHAN, NATHANIEL A II  
Address: 6923 OLD WHISKEY CREEK DRIVE  
City-St-Zip: FORT MYERS, FL 33919

Title: D (X) Delete  
Name: HOPPER, CRAIG M  
Address: 3229 PLACID VIEW DRIVE  
City-St-Zip: LAKE PLACID, FL 33852

**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: JOSEPH P. FELD

PD

11/12/2009

Electronic Signature of Signing Officer or Director

Date