

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043187

FILED
Jan 10, 2007
Secretary of State

Entity Name: AGAPE CHRISTIAN TOURS, LLC

Current Principal Place of Business:

4113 RUSSELL LANE
PANAMA CITY, FL 32404

New Principal Place of Business:

Current Mailing Address:

4113 RUSSELL LANE
PANAMA CITY, FL 32404

New Mailing Address:

FEI Number: 20-0630830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUGHES, J. ROBERT
220 MCKENZIE AVE.
PANAMA CITY, FL 32401 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WARD, SAMUEL S PRES
Address: 4113 RUSSELL LANE
City-St-Zip: PANAMA CITY, FL 32404

Title: MGR () Delete
Name: WARD, RUTH M SEC/TR
Address: 4113 RUSSELL LANE
City-St-Zip: PANAMA CITY, FL 32404 US

Title: MGR () Delete
Name: CRUMPTON, CONNIE M V.PRES
Address: 229 N CHURCH ST #302
City-St-Zip: CHARLOTTE, NC 28203

ADDITIONS/CHANGES:

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RUTH M. WARD

S&T

01/10/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date