

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N00000002656		
1. Entity Name AGAPE PRESBYTERIAN CHURCH, INC.		

FILED
06 NOV 28 PM 3:19

Principal Place of Business 5730 EAST HWY 98 PANAMA CITY, FL 32404	Mailing Address 5770 EAST HWY 98 PANAMA CITY, FL 32404
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2. Principal Place of Business <i>Agape P. Church</i> Suite, Apt. #, etc. <i>5730 E Hwy 98</i> City & State <i>Panama City FL</i> Zip <i>32404</i> Country <i>USA</i>	3. Mailing Address <i>Agape P. Church</i> Suite, Apt. #, etc. <i>5770 E Hwy 98</i> City & State <i>Panama City FL</i> Zip <i>32404</i> Country <i>USA</i>
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REINSTATEMENT

4. FEI Number 59-2962797	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent YANG, SAM-SUK 241 S. KIMBREL AVE. PANAMA CITY, FL 32404	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____

FILE NOW!!! FEE IS \$81.25 After January 1, 2007, Fee will be \$122.50	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P YANG, SAM-SUK 241 SOUTH KIMBREL AVE. PANAMA CITY, FL 32404 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 600082104236 11/28/06--01046--009 **\$1.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TT FLOYD, YOUNG-HUI 6104 BOAT RLOE RD. PANAMA CITY, FL 32404 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MOODY, SUN-HUI 3914 EAST 11ST PANAMA CITY, FL 32404 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SUN, HERBERT Y 1021 S KIMBREL AVE PANAMA CITY, FL 32404 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRUNN, YOUNG-SUN 1308 BIVA CIR PANAMA CITY, FL 32404 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Un-jong Wise 342 S Kimbrel Ave. Panama City, FL 32404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	un-jong Wise <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 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: SAM SUK YANG 11-19-06 850-871-3011
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

NOV 28 2006