

02/03

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # NO 1000003367

1. Entity Name

The Agape Resource Collaborative, Inc.



FILED

03 FEB 28 AM 9:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3514 Broadway

Suite, Apt. #, etc.

3. Mailing Address

P. O. Box 1861

Suite, Apt. #, etc.

200013694772

03/07/03--01062--004 **131.25

DO NOT WRITE IN THIS SPACE

City & State

West Palm Beach, Florida

City & State

West Palm Beach, Florida

4. FEI Number

65-1087904

Applied For

Not Applied

Zip 33407

Country

Palm Beach

Zip 33402

Country

Palm Beach

5. Certificate of Status Desired ☒ X

\$8.75 Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Dr. Elizabeth E. Castle-Hasan

Street Address (P.O. Box Number is Not Acceptable)

3514 Broadway

City West Palm Beach

FL

Zip 33407

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 understand 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

FEE IS \$5.00
Initial or Amend UBR

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

TITLE President/D
NAME Dr. Elizabeth E. Castle-Hasan
STREET ADDRESS 3514 Broadway
CITY-ST-ZIP West Palm Beach, Florida 33407

TITLE Vice President/D
NAME Edward N. Hasan
STREET ADDRESS 3654 Antisdale Avenue
CITY-ST-ZIP Cleveland Heights, Ohio 44118

TITLE Treasure/
NAME Megasn Morris
STREET ADDRESS 12063 Regal Court
CITY-ST-ZIP Wellington, Florida 33414

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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.