

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001735

FILED
May 09, 2007
Secretary of State

Entity Name: AGAPE CHRISTIAN ACADEMY AND PRESCHOOL INC.

Current Principal Place of Business:

2425 N. HIAWASSEE RD.
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

3038 GOLDENROCK DR.
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 27-0004392 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BISHOP, RICHARD
3038 GOLDENROCK DR.
ORLANDO, FL 32818 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: P () Delete
Name: BISHOP, RICHARD COO
Address: 3038 GOLDENROCK DR.
City-St-Zip: ORLANDO, FL 32818

Title: VP () Delete
Name: BISHOP, INGRID CEO
Address: 3038 GOLDENROCK DR.
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: KEATON, JOEL
Address: 2355 LILLY ST
City-St-Zip: ORLANDO, FL 32811

Title: D () Delete
Name: JACOBS, BETTY
Address: 1833 ATTUCKS AVE
City-St-Zip: ORLANDO, FL 32811

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: INGRID BISHOP

VP

05/09/2007

Electronic Signature of Signing Officer or Director

Date