2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # N02000001953

1. Entity Name
THE APOSTOLIC CHURCH OF OUR LORD JESUS CHRIST, INC.

Principal Place of Business	Mailing Address
3700 W ROBINSON ST ORLANDO, FL 32805	PO BOX 616281 ORLANDO, FL 32861

01212006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
45-0474099
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PALMER, SR., ALVIN BISHOP
3700 W ROBINSON ST
ORLANDO, FL 32805

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PALMER, SR., ALVIN BISHOP
STREET ADDRESS	PO BOX 616281
CITY-ST-ZIP	ORLANDO, FL 32861
TITLE	V
NAME	ROBINSON, E.J. BISHOP
STREET ADDRESS	4389 VILLAGE SQUARE DR
CITY-ST-ZIP	STONE MOUNTAIN, GA 30083
TITLE	D
NAME	PALMER, MARGARET F
STREET ADDRESS	PO BOX 626281
CITY-ST-ZIP	ORLANDO, FL 32861
TITLE	D
NAME	ROBINSON, DENISE
STREET ADDRESS	4389 VILLAGE SQUARE DR
CITY-ST-ZIP	STONE MOUNTAIN, GA 30083
TITLE	D
NAME	DAVIS, BEATRICE F
STREET ADDRESS	1205 VIZCAYA LAKES RD #109
CITY-ST-ZIP	OCOEE, FL 347616969
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/27/06-80036-016 70.00

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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: Margaret F. Palmer /MARGARET F. PALMER 4/18/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #