

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002338

FILED
Apr 21, 2009
Secretary of State

Entity Name: A PLACE CALLED HOPE OUTREACH OF THE ASSEMBLIES OF GOD, INC.

Current Principal Place of Business:

9401 VIA GRANDE WEST
WELLINGTON, FL 33411

New Principal Place of Business:

Current Mailing Address:

9401 VIA GRANDE WEST
WELLINGTON, FL 33411

New Mailing Address:

FEI Number: 02-0579135

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, EDWARD
9401 VIA GRANDE WEST
WELLINGTON, FL 33411 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: RODRIGUEZ, EDWARD
Address: 9401 VIA GRANDE WEST
City-St-Zip: WELLINGTON, FL 33411

Title: VP () Delete
Name: RODRIGUEZ, MARTHA A
Address: 9401 VIA GRANDE WEST
City-St-Zip: WELLINGTON, FL 33411

Title: T () Delete
Name: SILVESTRE, ROSA
Address: 13677 FOLKSTONE CT.
City-St-Zip: WELLINGTON, FL 33414

Title: S () Delete
Name: DAVILA, ADELAIDA
Address: 6150 HARBOUR GREENS DRIVE
City-St-Zip: LAKE WORTH, FL 33467

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: EDWARD RODRIGUEZ

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date