

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009330

FILED
Apr 11, 2007
Secretary of State

Entity Name: APOSTOLIC FELLOWSHIP INTERNATIONAL, INC.

Current Principal Place of Business:

New Principal Place of Business:

18415 N.W. 7 AVENUE
MIAMI, FL 33169

Current Mailing Address:

New Mailing Address:

18415 N.W. 7 AVENUE
MIAMI, FL 33169

FEI Number: 42-1573073 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

STEWART, SYDNEY R
18415 N.W. 7 AVENUE
MIAMI, FL 33169 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STEWART, SYDNEY R
Address: 18415 N.W. 7 AVENUE
City-St-Zip: MIAMI, FL 33169

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: DRUMMOND, ANSEL
Address: 19553 NW 2ND AVENUE #204
City-St-Zip: MIAMI, FL 33169

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: MCDONALD, ERNEST
Address: 6114 SW 35TH COURT
City-St-Zip: MIRAMAR, FL 33023

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SYDNEY STEWART

D

04/11/2007

Electronic Signature of Signing Officer or Director

_____ Date