2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 08, 2004
Secretary of State

DOCUMENT# N03000007628

Entity Name: AGAPE FAMILY COUNSELING CENTER, INC.

Current Principal Place of Business:

323 E KENNEDY BLVD
EATONVILLE, FL 32751

New Principal Place of Business:

323 E KENNEDY BLVD
SUITE G
EATONVILLE, FL 32751

Current Mailing Address:

PO BOX 2431
EATONVILLE, FL 32751

New Mailing Address:

FEI Number: 90-0102526 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCOTT, LEROY JR
4040 IVEYGIEN AVE
ORLANDO, FL 32826

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: SCOTT, LEROY JR
Address: 4040 IVEYGLEN AVE
City-St-Zip: ORLANDO, FL 32826

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: LEROY SCOTT P 06/08/2004

Electronic Signature of Signing Officer or Director — Date