

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009164

FILED
Apr 03, 2007
Secretary of State

Entity Name: AGAPE INTERNATIONAL CHRISTIAN UNIVERSITY, INC.

Current Principal Place of Business:

2099 W PROSPECT RD
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

2099 W PROSPECT RD
FT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 05-0609278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIAS, JAMES E DR
2099 W PROSPECT RD
FT LAUDERDALE, FL 33309 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: BIAS, JAMES E PH.D
Address: 2099 W PROSPECT RD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: V () Delete
Name: KELLY, SAMUEL E ED.D
Address: 2099 W PROSPECT RD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: T () Delete
Name: KEVIN, JOSEPH
Address: 2099 W PROSPECT RD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: ES () Delete
Name: DAVIS, MELVINA J PH.D
Address: 2099 W PROSPECT RD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: BM () Delete
Name: BROWN, BARBARA PH.D
Address: 2099 W. PROSPECT RD
City-St-Zip: FORT LAUDERDALE, FL 33309

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: ES (X) Change () Addition
Name: MCDONALD, JACQUELINE N MS
Address: 2099 W PROSPECT RD
City-St-Zip: FT LAUDERDALE, FL 33309

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: JAMES E BIAS

ADMI

04/03/2007

Electronic Signature of Signing Officer or Director

Date