# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 13, 2007**
**Secretary of State**

DOCUMENT# N05000008675

**Entity Name:** ASIA PACIFIC MESSIANIC FELLOWSHIP, INC.

**Current Principal Place of Business:**

2751 S.E. 150TH AVENUE
MORRISTON, FL 32668

**New Principal Place of Business:**

**Current Mailing Address:**

2751 S.E. 150TH AVENUE
MORRISTON, FL 32668

**New Mailing Address:**

**FEI Number: 02-0750428** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WALKWITZ, ROGER W
2751 S.E. 150TH AVENUE
MORRISTON, FL 32668 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: DPT ( ) Delete
Name: WALKWITZ, ROGER W
Address: 2751 S.E. 150TH AVENUE
City-St-Zip: MORRISTON, FL 32668 US

Title: DS ( ) Delete
Name: WALKWITZ, NAOMI J
Address: 2751 S.E. 150TH AVENUE
City-St-Zip: MORRISTON, FL 32668 US

Title: D ( ) Delete
Name: SWINEFORD, K. RICK
Address: 2931 SE 150TH AVE
City-St-Zip: MORRISTON, FL 32668 US

Title: DVP ( ) Delete
Name: WALKWITZ, RONALD A
Address: 2751 SE 150TH AVE
City-St-Zip: MORRISTON, FL 32668 US

**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 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: ROGER W WALKWITZ DPT 01/13/2007

Electronic Signature of Signing Officer or Director — Date