2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

1. Entity Nam	MENT # N06037 APOSTOLIC UNITED PENT	FECOSTA	L CHURCH,		A	Secretary of		
Principal Plac	e of Business	Mailin	g Address					
% EDGIL H. 2235 SEABO VENICE FL	OARD AVENUE_	% ED 2235	OGIL HALL SEABOARD AVEN CE FL 34293	IUE		FEKF ENN BOLED NIN 1801 BIBN BIBN BIB	 	
	Place of Business		ing Address					
Suite, Apt.	#, etc.	Su	ite, Apt #, etc.		1st MC	OORE CR2E037	(10/04)	
City & State		City & State			4. FEI Number 5	9-2469635	L1 ' '	plied For t Applicable
Zip	Country	Zip	>	Country	5. Certificate of St		8.75 Addi ee Required	
•	6. Name and Address of Curre	nt Registere	d Agent	Name	7. Name and Add	ress of New Registered Ag	ent	
HALL, EDGIL					ress (P.O. Box Number is I	Not Accentable)		
	DORCHESTER DR NICE FL 33595		4	0.100()400.		Total Company		
				City			Zip Code	•
- T	anamed entity submits this statement			,		FL	<u> </u>	
the obligat	tions of registered agent.	ent and tille d app	Icable (NOTE	Registered Agent signalure is	equired when reinstating)	DATE		
FILE NOW: FEE IS \$61.25 Due By May 1, 2005 9. Election Campaig Trust Fund Contri				· · · · · · · · · · · · · · · · · · ·				
					\$5.00 May Be Added to Fees	Make Check Florida Departn		
10.	Due By May 1, 2005 OFFICERS AND	DIRECTORS			Added to Fees		nent of S	tate
	Due By May 1, 2005	DIRECTORS		entribution.	Added to Fees ADDITIONS/CHANG	Florida Departn	nent of S CTORS IN	tate
10. TITLE NAME STREET ADDRESS	Due By May 1, 2005 OFFICERS AND I WAGONER, OSCAR 5439 SYLVANIA DR.	DIRECTORS	Trust Fund Co	11. IIILE NAME STREET ADDRESS	Added to Fees ADDITIONS/CHANG	Florida Department of the Property of the Prop	nent of S CTORS IN	tate
10. THE NAME STREET ADDRESS CITY-SI-ZIP THE NAME STREET ADDRESS	Due By May 1, 2005 OFFICERS AND WAGONER, OSCAR 5439 SYLVANIA DR. NORTH PORT FL T VOHASKA, MICHAEL 1005 SQUAW VALLEY	DIRECTORS	Trust Fund Co	11. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees ADDITIONS/CHANG	Florida Departm ES TO OFFICERS AND DIRE 1 UUU00000315590 19/05-80041-025	CTORS IN Change	10 Addition
10. THE NAME STREET ADDRESS CITY-SI-ZIP THE NAME STREET ADDRESS CITY-SI-ZIP THE NAME STREET ADDRESS CITY-SI-ZIP	Due By May 1, 2005 OFFICERS AND D WAGONER, OSCAR 5439 SYLVANIA DR. NORTH PORT FL T VOHASKA, MICHAEL 1005 SQUAW VALLEY VENICE FL 34293 PD HALL, EDGIL 380 DORCHESTER DR	DIRECTORS	Trust Fund Co	T11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Added to Fees ADDITIONS/CHANG	Florida Departm ES TO OFFICERS AND DIRE 1 1/00/00/0315590 19,705-80041-025	CTORS IN Change 61.25 Change	10 Addition
10. THEE NAME STREET ADDRESS CHY-SI-ZIP THEE NAME STREET ADDRESS	Due By May 1, 2005 OFFICERS AND D WAGONER, OSCAR 5439 SYLVANIA DR. NORTH PORT FL T VOHASKA, MICHAEL 1005 SQUAW VALLEY VENICE FL 34293 PD HALL, EDGIL 380 DORCHESTER DR VENICE FL T CHURCH, CAROLINE 315 8TH ST	DIRECTORS	Trust Fund Co	11. IIILE NAML SIREET ADDRESS CITY-SI-ZIP IIILE NAME SIREET ADDRESS CITY-SI-ZIP IIILE NAML SIREET ADDRESS	Added to Fees ADDITIONS/CHANG	Florida Departm ES TO OFFICERS AND DIRE (UUD) 000315590 13, '05-80041-025	CTORS IN Change 61.25 Change	10 Addition Addition

FILED

12. Hiereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

| Signature and type of Printed Name of Signing Officer or Director
| Date | Da