

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2007 08:00 AM
Secretary of State

DOCUMENT # N06037

1. Entity Name

VENICE APOSTOLIC UNITED PENTECOSTAL CHURCH,
INC.



Principal Place of Business

Mailing Address

% EDGIL HALL
2235 SEABOARD AVENUE
VENICE FL 34293

% EDGIL HALL
2235 SEABOARD AVENUE
VENICE FL 34293



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-2469635

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HALL, EDGIL
380 DORCHESTER DR
VENICE FL 33595

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE: D ☐ Delete
NAME: WAGONER, OSCAR
STREET ADDRESS: 5439 SYLVANIA DR.
CITY-STATE-ZIP: NORTH PORT FL

TITLE: T ☐ Delete
NAME: COLE, STANLEY
STREET ADDRESS: 5289 LECOYA ST
CITY-STATE-ZIP: NORTH PORT FL 34287

TITLE: PD ☐ Delete
NAME: HALL, EDGIL
STREET ADDRESS: 380 DORCHESTER DR
CITY-STATE-ZIP: VENICE FL

TITLE: T ☐ Delete
NAME: CHURCH, CAROLINE
STREET ADDRESS: 315 8TH ST
CITY-STATE-ZIP: NOKOMIS FL 34275

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS: 000000693708
CITY-STATE-ZIP: 04/16/07-80051-013 61.25

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

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STREET ADDRESS:
CITY-STATE-ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Edgil Hall - Edgil Hall - President 4-3-07 - 941-493-0492