## **2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## **FILED** Jun 02, 2008 8:00 am Secretary of State 06-02-2008 90006 010 \*\*\*\*61.25

1. Entity Nam	MENT # N06037 APOSTOLIC UNITED PEN	TECOSTAL CH	URCH,					08 90006	010 **** <i>6</i>	51.25	
Principal Place of Business Mailing Address % EDGIL HALL % EDGIL HALL 2235 SEABOARD AVENUE 2235 SEABOARD AVENUE VENICE, FL 34293 VENICE, FL 34293					.,	IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		( <b>111) 111) 111</b> ) <b>1</b>	TII AIAN AITII CIG	i	
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Addres	Mailing Address						<u> </u>		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				05092008	Chg-NP	CR2E0	37 (12/06)		
City & State		City & State				4. FEI Numbe 59-246			<del> </del>	oplied For of Applicable	
Zip	Country	Zip	Со	untry		5. Certificate	of Status Desire	d 🗆	\$8.75 Add Fee Require		
	6. Name and Address of Current	Registered Agent		.[		7. Name and	Address of Ne	w Registered	Agent		
HALL EDOU			~	Name							
HALL, EDGIL 380 DORCHESTER DR VENICE, FL 33595				Street Address (P.O. Box Number is Not Acceptable)							
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				City FL Zip Code						а	
SIGNATURE .	ions of registered agent.  3  Signature, typed or printed name of registered agen	t and tills if applicable	AIOTE Garietee	and Appart cionate						<del></del>	
	7		(NOTE: negister	ed Agent signate	ure required w	hen reinstating)	·	DATE			
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I melow certify find the information supplied with this filling does not quality for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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.

5-39-08-941-493-0493-Date Daytime Phone #