FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

N25673

(7)

AGAPE CHRISTIAN COMMUNITY CHURCH, INC.

FILED Feb 27 1998 8:00am Secretary of State

AGAFI	E OFFICIAL CONTINUINE							
Principal Place of Business		Mailing Address			יין אונוע ווווע פענו ואון פענו ואון פענו אין איני אין איני אין איני איני איני אי	A DIDIE GIBII	01911 B1811 1881	
1088 ARLINGTON ROAD JACKSONVILLE FL 32211 JACKSONVILLE FL 32211						3. Date incorporated or Qualified 03/30/1988 4. FEI Number	—— ———————————————————————————————————	Applied For
						59-1735872	1	lot Applicable
Principal Place of Business The Principal Place of Business		2a. Mailing Address 26			5. Certificate of Status Desired		Additional Required	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing		May Be		
City & Stat	le	City & State		7. Is this nonprofit corporation a homeowners		to Fees		
23		28			Yes No			
Zip	Country	Zip	Cour	itry		8. This corporation owes or has paid the curr	ent year li	ntangible
24	25	29	30			Personal Property Tax due June 30.	Yes	□ No
•	9. Name and Address of Curre	nt Registered Agent		B1 Nam	NA	10. Name and Address of New Registered A	<u>igent</u>	
DEAL #	CITU W		[14811	IE .			
DEAL, KEITH M. 101 BARNETT REGENCY TOWER			[1	32 Stre	et Addre	ss (P.O. Box Number is Not Acceptable)		
JACKSÖNVILLE FL 32211			li li	33				
	FIVE TE VEET		ļ.					
			['	34 City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Statut	es, the ab	ove-name	ed corpo	oration submits this statement for the purpose of on's board of directors. I hereby accept the appo	changing	lts registered
agent. I a	im familiar with, and accept the oblig	ations of, Section 617.0503, Fig	aumonzea orida Statu	by the c tes.	orporatio	on a board of directors. I hereby accept the appo	intment a	s registered
SIGNATURE	XKEITH M. DEAL					1-12-98		
12.	Signature, typed or printed name of registered ag	pent and title if applicable. (NOT ND DIRECTORS	E: Registered	Agent signat	ure required	d when reinstating) DATE	DIDECTO	DC 181 40
TITLE	PD OFFICERS AN	DELETE			Т-	ADDITIONS/CHANGES TO OFFICERS AND	Change	
NAME	GHOTTUSO, MARIO P	<u>—</u>	1.2 NAN					
STREET ADDRESS	3736 PIZZARRO RD			- Eet addres	s			
CITY-ST-ZIP	JACKSONVILLE FL		1.4 C(1)	-ST-ZIP				
TITLE	\$D	☐ DELETE	2.1 TITL	2.1 TITLE			Change	Addition
NAME	GOTTUSO, MARIO P.		2.2 NAM	1E		•		
STREET ADDRESS	3736 PIZZARO ROAD		2.3 STA	eet addres	s			
CITY-ST-ZIP	JACKSONVILLE FL	Protection		Y-ST-ZIP		:	7.0	
TITLE	DT Hughes, Judith	☐ DELETE	3.1 TITL:	_		· ·	☐ Change	Addition Addition
NAME Street address	13174 EBBTIDE CT.		3.2 NAM	ie Eet addres:	,			
CITY-ST-ZIP	JACKSONVILLE FL			r-st-zip	•			
TITLE	V	DELETE	4.1 TITE	··	+		Change	Addition
NAME	RICHMAN, ANN G		4. 2 NAM	Æ				_
STREET ADDRESS	13174 EBBTIDE COURT		4.3 STR	ET ADDRES	3			
CITY-ST-ZIP	JACKSONVILLE FL		4.4 City	4.4 CITY-ST-ZIP				
TITLE	DS	☐ DELETE	5.1 TITL	E			Change	Addition
NAME	BAURICHTER, LEAH		5.2 NAM	5.2 NAME				
STREET ADDRESS	13174 EBBTIDE CT		5.3 STRE	et addres:	3			
CITY-ST-ZIP	JACKSONVILLE FL			-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		
TITLE	D DATTICO PARRADA	DELETÉ	6.1 TITLI			[Change	☐ Addition
NAME	GOTTUSO, BARBARA		6.2 NAM					
STREET ADDRESS	3736 PIZZARRO RD		6.3 STR	ET ADDRESS	3			

14. I hereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP

RIGHATURE WALLE & CALLERY MAILE

JACKSONVILLE FL

CITY-ST-ZIP

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