

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25673

1. Entity Name

AGAPE CHRISTIAN COMMUNITY CHURCH, INC.

Principal Place of Business

1066 ARLINGTON ROAD
JACKSONVILLE FL 32211

Mailing Address

1066 ARLINGTON ROAD
JACKSONVILLE FL 32211-5811

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1735872

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DEAL, KEITH M.
101 BARNETT REGENCY TOWER
JACKSONVILLE FL 32211

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME GHOTTUSO, MARIO P
STREET ADDRESS 3736 PIZZARRO RD
CITY-ST-ZIP JACKSONVILLE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD
NAME GOTTUSO, MARIO P.
STREET ADDRESS 3736 PIZZARRO ROAD
CITY-ST-ZIP JACKSONVILLE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DT
NAME HUGHES, JUDITH
STREET ADDRESS 13174 EBBTIDE CT.
CITY-ST-ZIP JACKSONVILLE FL ☒ Delete

TITLE DT
NAME HUGHES, JUDITH
STREET ADDRESS 12608 Chapeltown Circle West
CITY-ST-ZIP Jacksonville, Florida 32225 ☒ Change ☐ Addition

TITLE V
NAME RICHMAN, ANN G
STREET ADDRESS 13174 EBBTIDE COURT
CITY-ST-ZIP JACKSONVILLE FL ☒ Delete

TITLE VPD
NAME RICHMAN, ANN G.
STREET ADDRESS 12608 Chapeltown Circle West
CITY-ST-ZIP Jax., FL 32225 ☒ Change ☐ Addition

TITLE DS
NAME BAURICHTER, LEAH
STREET ADDRESS 13174 EBBTIDE CT
CITY-ST-ZIP JACKSONVILLE FL ☒ Delete

TITLE DS
NAME Baurichter, Leah
STREET ADDRESS 12608 Chapeltown Circle West
CITY-ST-ZIP Jax., FL 32225 ☒ Change ☐ Addition

TITLE D
NAME GOTTUSO, BARBARA
STREET ADDRESS 3736 PIZZARRO RD
CITY-ST-ZIP JACKSONVILLE FL ☒ Delete *No Change*

TITLE D
NAME GOTTUSO, Barbara
STREET ADDRESS 3736 Pizzarro Road
CITY-ST-ZIP Jacksonville, FL 32217 ☒ Change ☐ Addition

12. 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 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:

Mario P. Ghattuso
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-5-00

724-9848

Date

Daytime Phone #

CR2E037 (9/99)