

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 29, 2004 08:00 AM
Secretary of State

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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-1735872

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

GOTTUSO, MARIO P
1066 ARLINGTON ROAD
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Mario P. Sattura, President

1-26-04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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	PD	<input type="checkbox"/> Delete
NAME	GOTTUSO, MARIO P	
STREET ADDRESS	3736 PIZZARRO RD	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	GOTTUSO, MARIO P	
STREET ADDRESS	3736 PIZZARRO ROAD	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	DT	<input type="checkbox"/> Delete
NAME	HUGHES, JUDITH	
STREET ADDRESS	12608 CHAPELTOWN CIR. W	
CITY-ST-ZIP	JACKSONVILLE FL 32225	
TITLE	V	<input type="checkbox"/> Delete
NAME	RICHMAN, ANN G	
STREET ADDRESS	12608 CHAPELTOWN CIR. W	
CITY-ST-ZIP	JACKSONVILLE FL 32225	
TITLE	DS	<input type="checkbox"/> Delete
NAME	BAURICHTER, LEAH	
STREET ADDRESS	12608 CHAPELTOWN CIR. W	
CITY-ST-ZIP	JACKSONVILLE FL 32225	
TITLE	D	<input type="checkbox"/> Delete
NAME	GOTTUSO, BARBARA	
STREET ADDRESS	3736 PIZZARRO RD	
CITY-ST-ZIP	JACKSONVILLE FL 32217	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	U000000019932
CITY-ST-ZIP	01/29/04-80043-024 61.25
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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. Sattura, President

1-26-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #