2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28940

FILED Jul 08, 2008 Secretary of State

Entity Name: AGAPE WORSHIP CENTER, INC.

Current Principal Place of Business:			New Principal Place of Business:	
2230 N.W. 2 FT. LAUDE	22ND ST. RDALE, FL 33311	US		
Current Mailing Address:			New Mailing Address:	
2230 N.W. 2 FT. LAUDE	22ND ST. RDALE, FL 33311	US		
FEI Number: 65-0122675 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
MACK, DARNELL 630 NE 40TH STREET POMPANO BEACH, FL 33064 US				
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:				
	Electronic Sig	nature of Registered Agent		Date
OFFICERS AND DIRECTORS: AD			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () Delete MACK, DARNELL 630 NE 40TH STREET POMPANO BEACH, FI		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DV () Delete MACK, ELAINE 630 NE 40TH STREET FT. LAUDERDALE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DS () Delete MOBLEY, SALLY 1428 NW 6TH AVE FT. LAUDERDALE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DS () Delete WILSON, JENNIFER 2080 NE 1ST AVE POMPANO BEACH, F		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DT () Delete HARRIS, PATRICA 6983 N.W. 19TH STRI MARGATE, FL 33063	EET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete GILES, AMOS 624 NW 20TH CT POMPANO BEACH, FI		Title: Name: Address: City-St-Zip:	() Change () Addition
I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.				

SIGNATURE: DARNELL MACK MR. 07/08/2008