

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N30193

**FILED**  
**Jan 10, 2012**  
**Secretary of State**

**Entity Name:** APOSTOLIC FAITH TEMPLE, INCORPORATED

**Current Principal Place of Business:**

300 MILFORD PLACE  
NEW SMYRNA BCH, FL 32168 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2819  
NEW SMYRNA BEACH, FL 32170

**New Mailing Address:**

**FEI Number:** 59-3021677

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PETERSON, SID C. JR.  
418 CANAL STREET  
NEW SMYRNA BEACH, FL 32069 US

**Name and Address of New Registered Agent:**

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 Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: THOMAS, ROBERT B.  
Address: 390 HOWARD AVENUE  
City-St-Zip: NEW SMYRNA BEACH, FL

Title: D  
Name: LAWSON, JOHN HENRY  
Address: 546 GREENLAWN TERRACE  
City-St-Zip: NEW SMYRNA BEACH, FL

Title: D  
Name: GRAHAM, NATHANIEL  
Address: 2115 SABAL PALM DR.  
City-St-Zip: EDGEWATER, FL

Title: D  
Name: CARSON, WILLIE  
Address: 409 HICKORY STREET  
City-St-Zip: NEW SMYRNA BEACH, FL

I hereby 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 all other like empowered.

SIGNATURE: ROBERT B THOMAS

PRES

01/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date