## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N39658

FILED Apr 17, 2007 Secretary of State

Entity Name: APOSTOLIC CHRISTIAN CHURCH OF NORTH PORT, INC.

Current P					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
8064 PRIC PO BOX 7 NORTH P		,	8064 PRICE BLVD. NORTH PORT, FL 34:	287 US	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
8064 PRIC PO BOX 7 NORTH P		,	P.O. BOX 7581 NORTH PORT, FL 34	287 US	
FEI Number	: 59-2155097	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	urrent Registered Agent:	Name and Address of	f New Registered Agent:	
1642 JEW SARASOT The above	ΓA, FL 34240 e named entity s	US ubmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
	e of Florida.				
SIGNATU		c Signature of Registered Age	ant	 Date	
Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
OFFICER	S AND DIRECT	UKS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTOR	
Title: Name: Address:	WEINHARDT, KO 2392 VANCE TE	RR.	Title: Name: Address:	( ) Change ( ) Addition	
City-St-Zip:	PORT CHARLOT	TE, FL 33981	City-St-Zip:		
City-St-Zip: Title: Name: Address: City-St-Zip:		Delete RY	•	()Change ()Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	PT () POHANKA, PER 1642 JEWEL DF SARASOTA, FL	Delete RY R 34240 Delete E AK DR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition ( ) Change ( ) Addition	
Title: Name: Address:	PT () POHANKA, PER 1642 JEWEL DF SARASOTA, FL S () SPEVAK, GRAC 1691 MOSSY O NORTH PORT, F	Delete RY 34240  Delete E AK DR. EL 34287  Delete E WAY	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address:	PT () POHANKA, PER 1642 JEWEL DF SARASOTA, FL  S () SPEVAK, GRAC 1691 MOSSY O, NORTH PORT, F  PD () HERTIG, MAX 3200 BAY RIDG PORT CHARLOT	Delete RY R 34240  Delete E AK DR. EL 34287  Delete E WAY TE, FL 33953  Delete KE LN	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: PERRY POHANKA PT 04/17/2007