

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40730

FILED
Mar 17, 2011
Secretary of State

Entity Name: AGAPE CHRISTIAN MINISTRIES OF HOMESTEAD, INC.

Current Principal Place of Business:

13436 SW 291 LANE
LEISURE CITY, FL 33033

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1542
LEISURE CITY, FL 33033

New Mailing Address:

FEI Number: 65-0241065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, LUDLOW, SR.
13436 SW 291 LANE
LEISURE CITY, FL 33033 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: DPT
Name: WALKER, LUDLOW, SR.
Address: 13436 SW 291 LANE
City-St-Zip: HOMESTEAD, FL 33033

Title: DS
Name: WALKER, MILLICENT
Address: 13436 SW 291 LANE
City-St-Zip: HOMESTEAD, FL 33033

Title: D
Name: GINGERICH, LESTER
Address: 1025 HONORE AVE
City-St-Zip: SARASOTA, FL 33580

Title: DVP
Name: MILLER, ALVIN W
Address: 2519 CARRIAGE FORD RD.
City-St-Zip: CATLETT, VA 20119

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: LUDLOW WALKER

DP

03/17/2011

Electronic Signature of Signing Officer or Director

Date