## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

## Aug 09, 2000 8:00 am Secretary of State **DOCUMENT # N46408** 1. Entity Name AGAPE MINISTRIES OF COCOA BEACH, FLORIDA, INC. 08-09-2000 90081 017 \*\*\*\*61.25 Principal Place of Business Mailing Address 260 N. ORLANDO AVE. 260 N. ORLANDO AVE. P.O. BOX 320343 P.O. BOX 320343 COCOA BCH. FL 32932 COCOA BCH. FL 32932 2. Principal Place of Business 3. Mailing Address -- TUTERNATION AND PIR 200 INTERNATIONAL DIS Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE 407 City & State 4. FEI Number Applied For 59-3102435 pape canavera 'E CHNAVERAL Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired ろひのひ Fee Required 15A 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) WELLMAN, SELLARD D J 840 S BANANA REPUBLIC DR **MERRITT ISLAND FL 32952** City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State After September 13, 2000 min. will be \$236.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ■ Addition ☐ Delete TITLE ☐ Change TITLE WELLMAN. SELLARD NAME NAME **CR2E037** STREET ADDRESS 840 S. BANANA RIVER DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MERRITT FL VPD ☐ Change ☐ Delete Addition TITLE TITLE PITSTICK, DONALD NAME NAME STREET ADDRESS 200 INTERNATIONAL DR., #407 STREET ADDRESS CITY-ST-ZIP CAPE CANAVERAL FL CITY-ST-ZIE SD Delete Change Change [ Addition TITLE TITLE Wellman, Joan NAME NAME 840 S. BANANA RIVER DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P MERRITT ISL FL TD ☐ Change TITLE ☐ Delete TITLE Addition PITSTICK, ANN NAME NAME STREET ADDRESS 200 INTERNATIONAL DR STREET ADDRESS CITY-ST-ZIP CAPE\_CANAVERAL\_FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition WELLMAN, SELLARD NAME NAME 840 S. BANANA RIVER DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MERRIT ISLAND FL 32952** CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition PITSTICK, DONALD NAME NAME STREET ADDRESS 200 INTERNATIONAL DR. #407 STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP CAPE CANAVERAL FL 32920 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

**FILED**