

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48859

FILED  
Apr 04, 2007  
Secretary of State

**Entity Name:** AGAPE LOVE FELLOWSHIP CHURCH, INC.

**Current Principal Place of Business:**

2101 S W SAVAGE BLVD  
PORT SAINT LUCIE, FL 34953 US

**New Principal Place of Business:**

**Current Mailing Address:**

768 CALLE ARAGON  
UNIT N  
LAGUNA WOODS, CA 92637 US

**New Mailing Address:**

**FEI Number:** 56-2531646      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

FOGLIO, FRANK S REV  
2101 S W SAUAGE BLVD  
PORT ST LUCIE, FL 34953 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: EDT ( ) Delete  
Name: FOGLIO, FRANK S  
Address: 1410 DUNCAN LOOP SOUTH, #204  
City-St-Zip: DUNEDIN, FL 34698

Title: TD ( ) Delete  
Name: JOHNSONS, JULIE  
Address: 1410 DUNCAN LOOP SOUTH, #204  
City-St-Zip: DUNEDIN, FL 34698

Title: SD ( ) Delete  
Name: DUAME, STEPHEN G  
Address: 102 BEDFORD AVE.  
City-St-Zip: HIALEAH, FL 33010

Title: D ( ) Delete  
Name: COHEN, MAURICE  
Address: 2101 SW SAVAGE BLVD  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: D ( ) Delete  
Name: GREGORIO, JOHN  
Address: 2895 LAKE SHORE DR  
City-St-Zip: FT LAUDERDALE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: DUAME, STEPHEN G  
Address: 102 BEDFORD AVE.  
City-St-Zip: HALLANDALE, FL 33010

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: FRANK S. FOGLIO

EDT

04/04/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date