

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49350

FILED  
Jan 11, 2008  
Secretary of State

Entity Name: AGAPE LOVE, INC.

**Current Principal Place of Business:**

3764 N.W. 2ND STREET  
FT LAUDERDALE, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

2820 N.W. 18TH COURT  
FORT LAUDERDALE, FL 33311

**New Mailing Address:**

FEI Number: 65-0326136

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MATTHEWS, FRANK D.  
3764 NW 2 ST  
FT LAUDERDALE, FL 33311 US

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

POWELL, EDWARD.  
3764 NW 2 ST  
FT LAUDERDALE, FL 33311 US

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: EDWARD POWELL

01/11/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CAMPBELL, EDDYE M  
Address: 3861 NW 5 ST  
City-St-Zip: FT LAUDERDALE, FL

Title: D ( ) Delete  
Name: FAIR, CHESTER  
Address: 3764 NW. 2 STREET  
City-St-Zip: FORT LAUDERDALE, FL

Title: D ( ) Delete  
Name: HALL, RONALD  
Address: 3764 N.W. 2 STREET  
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: D (X) Delete  
Name: MATTHEWS, FRANK  
Address: 3764 NW 2STREET  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D (X) Delete  
Name: SEAFUR, WILLIE  
Address: 310 LONG ISLAND AVE.  
City-St-Zip: FORT LAUDERDALE, FL 33311

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

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

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

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

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 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: EDWARD POWELL

D

01/11/2008

Electronic Signature of Signing Officer or Director

Date