2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2004 8:00 am
Secretary of State
05-10-2004 90455 014 ****70.00

DOCUMENT # N93000001472

1. Entity Name
FIRST APOSTOLIC CHURCH OF CAPE CORAL, INC.

Principal Place of Business	Mailing Address
2131 DIPLOMAT PKWY CAPE CORAL, FL 33909	1425 NE 21ST AVE CAPE CORAL, FL 33909

04172004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	2131 DIPLOMAT PKWY Suite, Apt. #, etc.
City & State	City & State CAPE CORAL FL
Zip / Country	Zip 33909 / Country

4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MCCURLEY, JAMES W 2131 DIPLOMAT PKWY E CAPE CORAL, FL 33909	Name ABRAMS, JEFFREY Street Address (P.O. Box Number is Not Acceptable) 2191 BAHIA LN City N. FT. MYERS **FL** Zip Code 33917

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] Trustee 4-30-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TSD MCCURLEY, RUBY J 2131 DIPLOMAT PKWY E CAPE CORAL, FL 33909	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FROSS, TIMOTHY 105 S RIEBELING ST APT D COLUMBIA, IL 62236	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ABRAMS, JEFFREY 2131 DIPLOMAT PKWY E CAPE CORAL, FL 33909	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ABRAMS, JEFFREY T 2191 BAHIA LN N. FT. MYERS FL 33917	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MCCURLEY, JAMES W 2131 DIPLOMAT PKWY CAPE CORAL, FL 33909	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	GRINDLEY, AARON T 1000 N.E 11th AV CAPE CORAL, FL 33909	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SCROGGINS, MELVIN 2131 DIPLOMAT PKWY E CAPE CORAL, FL 33909	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T SCROGGINS, MELVIN 1748 MAGNOLIA DR. N. FT. MYERS FL 33917	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BROWN, DONALD 2131 DIPLOMAT PKWY E CAPE CORAL, FL 33909	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BROWN, DONALD T 1895 N. Tamiami Trl C8 N. FT. Myers FL 33903	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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

SIGNATURE: [signature] 4-30-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #