NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State
05-21-2002 91191 006 ****70.00

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DOCUMENT # N94000000481

1. Entity Name
APOLLO BEACH COMMUNITY CHURCH, INC.

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
6414 GOLF & SEA BLVD.	6414 GOLF & SEA BLVD.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: APOLLO BEACH, FL	City & State: APOLLO BEACH, FL
Zip: 33572 Country:	Zip: 33572 Country:

4. FEI Number: 59-3210482 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: HUGH MORRIS

Street Address (P.O. Box Number is Not Acceptable): 11915 CEDARFIELD DR

City: RIVERVIEW FL Zip Code: 33569

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: Hugh Morris / HUGH MORRIS 4/29/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25 Initial or Amended UBR

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LOPEZ, ALBERTO
STREET ADDRESS	1028 APOLLO BEACH BLVD
CITY-ST-ZIP	APOLLO BEACH, FL 33572
TITLE	V
NAME	CLARK, MICHAEL L
STREET ADDRESS	1408 BEACH CLUB LANE
CITY-ST-ZIP	APOLLO BEACH, FL 33572
TITLE	T
NAME	WAY, GRACE
STREET ADDRESS	1007 RIVER DR
CITY-ST-ZIP	RUSKIN, FL 33570
TITLE	D
NAME	GREENE, ALBERT
STREET ADDRESS	109 ISLAND WATER WAY
CITY-ST-ZIP	APOLLO BEACH, FL 33572
TITLE	
NAME	
STREET ADDRESS	
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CR2E037B (12/01)

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

SIGNATURE: Alberto Lopez / ALBERTO LOPEZ 4/29/02 748-3821
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #