2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000481

FILED Jan 23, 2007 Secretary of State

Entity Name: APOLLO BEACH COMMUNITY CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 6414 GOLF & SEA BLVD APOLLO BEACH, FL 33572 **Current Mailing Address: New Mailing Address:** 6414 GOLF & SEA BLVD APOLLO BEACH, FL 33572 FEI Number: 59-3210482 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HULTZ, GARY M 104 LOOKOUT DR APOLLO BEACH, FL 33572 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HEALY, RAY Name: Name: Address: 306 DICKMAN DR. S.W. Address: RUSKIN, FL 33570 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition Name: MCEWEN, JIM Name: Address: 13304 SILVERCREEK DR Address: City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: Title: () Delete Title: () Change () Addition WARNER, CAROLYN Name: Name: 203 2ND AVE. SE. Address: Address: City-St-Zip: RUSKIN, FL 33570 City-St-Zip: Title: () Delete Title: () Change () Addition Name: CLARK, MICHAEL L Name: Address: 1408 BEACH CLUB LANE Address: City-St-Zip: APOLLO BEACH, FL 33572 City-St-Zip: Title: (X) Delete Title: () Change () Addition CROCKETT, FRANK Name: Name: 516 FIREFLY LANE Address: Address: City-St-Zip: APOLLO BEACH, FL 33572 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: GARY M. HULTZ RA 01/23/2007