2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001494

FILED Mar 19, 2009 Secretary of State

Entity Name: THE APOSTOLIC WORSHIP CENTER CHURCH, INC.

Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
	ERSTAR RD. O, FL 32818 US			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
P.O. BOX 22028 LK BUENA VISTA, FL 32830 US		8001 SILVERSTAR RD ORLANDO, FL 32818). US	
FEI Number	:: 59-3232239 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of Current Registered Agent:	Name and Address of	New Registered Agent:	
715 KEAT OCOEE, F The above	ON, FRANK E. ON PKWY FL 34761 US e named entity submits this statement for the pute of Florida.	urpose of changing its registered	l office or registered agent, or both,	
SIGNATU				
	Electronic Signature of Registered Ager	nt	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	T () Delete MCLEAN, STACY 8001 SILVERSTAR RD ORLANDO, FL 32818	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	P () Delete THOMPSON, FRANK 715 KEATOM PKWY ORLANDO, FL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete STARKS, RUTH M 2583 RAVENALL AVE. ORLANDO, FL 32811	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete CRAYTON, BEBE 8001 SILVER STAR RD. ORLANDO, FL 32818	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete CRAYTON, LARRY 8001SILVER STAR ROAD ORLANDO, FL 32818	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete THOMPSON, ELIZABETH C 8001 SILVER STAR ROAD ORLANDO, FL 32818 US	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: FRANK E. THOMPSON P 03/19/2009