

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001496

FILED
May 02, 2007
Secretary of State

Entity Name: APOSTOLIC WORSHIP CENTER CHILD DEVELOPMENT, INC.

Current Principal Place of Business:

8001 SILVER STAR RD
ORLANDO, FL 32818 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 22028
LAKE BUENA VISTA, FL 32830 US

New Mailing Address:

FEI Number: 59-3232248 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

THOMPSON, FRANK E
715 KEATON PKWY
OCOE, FL 34761 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: THOMPSON, FRANK
Address: 715 KEATON PKWY
City-St-Zip: OCOE, FL 34761

Title: D () Delete
Name: STARKS, RUTH M
Address: 2583 RAVENALL AVE.
City-St-Zip: ORLANDO, FL

Title: T () Delete
Name: JACKSON, ANDREA
Address: 8001 SILVERSTAR RD
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: MCLEAN, STACY
Address: 8001 SILVER STAR RD
City-St-Zip: ORLANDO, FL 32818

Title: S () Delete
Name: WHEELER-THOMPSON, ELIZABETH C
Address: 8001 SILVER STAR ROAD
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: WILEY-DAWSON, MARIE
Address: 8001 SILVERSTAR ROAD
City-St-Zip: ORLANDO, FL 32818 US

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
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City-St-Zip:

Title: () Change () Addition
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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: FRANK E. THOMPSON

PD

05/02/2007

Electronic Signature of Signing Officer or Director

Date