

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 07, 2006 8:00 am**  
**Secretary of State**

04-07-2006 90044 043 \*\*\*\*70.00

**DOCUMENT # N95000006027**

1. Entity Name

CITY OF PALMS APOSTOLIC CHURCH, INC.



Principal Place of Business

1807 VERONICA SCHUMAKER BLVD  
FORT MYERS FL 33916

Mailing Address

3150 LAYFETTE STREET  
FT. MYERS FL 33916



2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

3150 Lafayette St.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

TROUPE, VERNA LEE REV.  
3150 LAYFETTE STREET  
FT. MYERS FL 33916

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

3150 Lafayette St.

City

FL

Zip Code

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

*Rev. Verna Lee Troupe P.D.*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-1-2006

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

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

TITLE PD ☐ Delete  
NAME TROUPE, VERNA L  
STREET ADDRESS 3150 LAYFETTE STREET  
CITY-ST-ZIP FT. MYERS FL 33916

TITLE SD ☐ Delete  
NAME KENDRICK, JOHNNIE M  
STREET ADDRESS 3437 JEFFCOTT STREET  
CITY-ST-ZIP FT. MYERS FL 33916

TITLE D ☐ Delete  
NAME MOORE, FREDDIE R  
STREET ADDRESS 715 HARLEM ACADEMY BLVD.  
CITY-ST-ZIP CLEWISTON FL 33440

TITLE TD ☐ Delete  
NAME TROUPE, ROBERT L  
STREET ADDRESS 3150 LAYFETTE STREET  
CITY-ST-ZIP FT. MYERS FL 33916

TITLE AS ☐ Delete  
NAME ISAAC, GLORIA  
STREET ADDRESS 4036 EDGEWOOD AVE  
CITY-ST-ZIP FORT MYERS FL 33916

TITLE D ☐ Delete  
NAME KENDRICK, PAMELA L  
STREET ADDRESS 3437 JEFFCOTT STREET  
CITY-ST-ZIP FT. MYERS FL 33916

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 3150 Lafayette St.  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 3150 Lafayette St.  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

*Rev. Verna L. Troupe*

4/2/06

(239) 332-1568