2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000006027

FILED Apr 30, 2012 Secretary of State

Entity Name: CITY OF PALMS APOSTOLIC CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

1807 VERONICA SHOEMAKER BLVD FORT MYERS, FL 33916

Current Mailing Address: New Mailing Address:

3150 LAFAYETTE ST FT. MYERS, FL 33916

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TROUPE, VERNA LEE REV.

3150 LAFAYETTE ST
FT. MYERS, FL 33916 US

TROUPE, ROBERT L
3150 LAFAYETTE ST
FT. MYERS, FL 33916 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: ROBERT L. TROUPE 04/30/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: TD

Name: TROUPE, ROBERT L Address: 3150 LAFAYETTE ST City-St-Zip: FT. MYERS, FL 33916

Title: SD

Name: KENDRICK, JOHNNIE M Address: P.O. BOX 7458 City-St-Zip: FT. MYERS, FL 33911

Title:

Name: MOORE, FREDDIE R
Address: 715 HARLEM ACADEMY BLVD.
City-St-Zip: CLEWISTON, FL 33440

Title: AS

Name: ISAAC, GLORIA
Address: 4036 EDGEWOOD AVE
City-St-Zip: FORT MYERS, FL 33916

Title:

Name: KENDRICK, PAMELA L Address: P.O. BOX 7381 City-St-Zip: FT. MYERS, FL 33911

I hereby 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 all other like empowered.

SIGNATURE: ROBERT L. TROUPE TD 04/30/2012