2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000700

City-St-Zip:

FILED Apr 30, 2009 Secretary of State

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Entity Nar	me: APOSTO	LIC MINISTERIA	AL, INC.						
Current Principal Place of Business:					New Principal Place of Business:				
1201 BEA INVERNES	AVENUE SS, FL 34452								
Current Mailing Address:					New Mailing Address:				
1201 BEA INVERNES	AVENUE SS, FL 34452								
FEI Number:	59-3393880	FEI Number Ap	plied For()	FEI Nun	nber Not Appl	icable ()	Certific	ate of Status De	esired ()
Name and	Address of C	Current Registe	red Agent:		Name and	Address	of New Reg	gistered Age	nt:
1201 BEA	D, DOUGLAS AVENUE SS, FL 34452	E JR. US							
	named entity : e of Florida.	submits this stat	ement for the p	urpose o	f changing i	ts registere	ed office or	registered age	ent, or both,
SIGNATUR	RE:								
	Electror	nic Signature of	Registered Age	nt				Date	
OFFICERS	S AND DIREC	TORS:			ADDITION	IS/CHANG	ES TO OF	FICERS AND	DIRECTORS:
Title: Name: Address: City-St-Zip:	D () HAGANEY, JAN 3168 E FAWN INVERNESS, F	CT.			Title: Name: Address: City-St-Zip:		() Change	() Addition	
Title: Name: Address: City-St-Zip:	D () SHEPERD, DA' 2725 E. POSSI INVERNESS, F	JM CT.			Title: Name: Address: City-St-Zip:	D SHEPERD, 3200 E. FA INVERNES		() Addition	
Title: Name:) Delete			Title: Name:	D HAGANEY,	APRIL	(X) 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.

City-St-Zip: INVERNESS, FL 34452

SIGNATURE: JAMES HAGANEY D 04/30/2009