

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2001 8:00 am
Secretary of State

05-29-2001 90012 024 ****70.00

DOCUMENT # N97000000158

1. Entity Name

AGAPE HOME, INC.

Principal Place of Business

Mailing Address

**3 AVENUE J
 MOORE HAVEN FL 33471**

**P.O. BOX 1253
 MOORE HAVEN FL 33471**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0721743

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TUEL, DEBORAH
 3 AVENUE J
 PO BOX 1253
 MOORE HAVEN FL 33471**

Name

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

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.

SIGNATURE

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

(NOT: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
 NAME **COUSE, MILLER**
 STREET ADDRESS **227 E. CRESCENT DR.**
 CITY-ST-ZIP **CLEWISTON FL 33440**

TITLE **D** ☐ Change ☒ Addition
 NAME **Hamilton, Donald**
 STREET ADDRESS **207 Pine Lane**
 CITY-ST-ZIP **Clewiston FL 33440**

TITLE **D** ☐ Delete
 NAME **COUSE, TONI**
 STREET ADDRESS **227 E. CRESCENT DR.**
 CITY-ST-ZIP **CLEWISTON FL 33440**

TITLE **SD** ☒ Change ☐ Addition
 NAME **Couse Toni**
 STREET ADDRESS **227 E Crescent Dr**
 CITY-ST-ZIP **Clewiston FL 33440**

TITLE **PD** ☒ Delete
 NAME **TUEL, FREDDY W**
 STREET ADDRESS **3 AVE J PO BOX 1253**
 CITY-ST-ZIP **MOORE HAVEN FL 33471**

TITLE **TD** ☐ Change ☒ Addition
 NAME **Van Sickle, Deborah**
 STREET ADDRESS **101 Ridgewood Ave**
 CITY-ST-ZIP **Clewiston FL 33440**

TITLE **D** ☐ Delete
 NAME **FORBES, JANICE**
 STREET ADDRESS **201 W. DELMONTE AVE.**
 CITY-ST-ZIP **CLEWISTON FL 33440**

TITLE **D** ☐ Change ☒ Addition
 NAME **Hamilton, Virginia**
 STREET ADDRESS **207 Pine Lane**
 CITY-ST-ZIP **Clewiston, FL 33440**

TITLE **VD** ☐ Delete
 NAME **FORBES, JIM**
 STREET ADDRESS **201 W DELMONTE AVE**
 CITY-ST-ZIP **CLEWISTON FL 33440**

TITLE **D** ☐ Change ☒ Addition
 NAME **Williams, Phillip**
 STREET ADDRESS **30 9th Street**
 CITY-ST-ZIP **Bonita Bch, FL 34134**

TITLE **ST** ☐ Delete
 NAME **TUEL, DEBORAH A**
 STREET ADDRESS **3 AVE J PO BOX 1253**
 CITY-ST-ZIP **MOORE HAVEN FL 33471**

TITLE **PD** ☒ Change ☐ Addition
 NAME **Tuel, Deborah A**
 STREET ADDRESS **3 Ave J PO Box 1253**
 CITY-ST-ZIP **Moore Haven FL 33471**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Deborah A. Tuel 5-24-01 863-946-2228

CR2E037 (10/00)

A Hechman

AGAPE HOME, INC.

**3 AVENUE J
PO BOX 1253
MOORE HAVEN, FL 33471
863-946-2228**

BOARD OF DIRECTORS

**MILLER COUSE
TONI COUSE
JAMES FORBES
JANICE FORBES
DON HAMILTON
GINA HAMILTON
PEARL ANN HINES
DEBORAH TUEL
DEBORAH VAN SICKLE**

SPIRITUAL DIRECTORS

**PHILLIP WILLIAMS
LISA WILLIAMS**

**THE LOVE OF CHRIST & THE POWER OF THE CROSS
HEALING & RESTORATION FOR EMOTIONALLY WOUNDED WOMEN**

*#N97000000158
771777*

May 25, 2001

**D
HINES, PEARL ANN
JEFF WIGGINS RD, PO BOX 822
MOORE HAVEN, FL 33471**