

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000158

FILED
Apr 12, 2010
Secretary of State

Entity Name: AGAPE HOME, INC.

Current Principal Place of Business:

3 AVENUE J
MOORE HAVEN, FL 33471

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1253
MOORE HAVEN, FL 33471

New Mailing Address:

FEI Number: 65-0721743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TUEL, DEBORAH
3 AVENUE J
MOORE HAVEN, FL 33471 US

Name and Address of New Registered Agent:

TUEL, DEBORAH A
3 AVENUE J
MOORE HAVEN, FL 33471 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: DEBORAH A. TUEL

04/12/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: COUSE, MILLER
Address: 227 E. CRESCENT DR.
City-St-Zip: CLEWISTON, FL 33440

Title: SD
Name: COUSE, TONI
Address: 227 E. CRESCENT DR.
City-St-Zip: CLEWISTON, FL 33440

Title: PD
Name: TUEL, DEBORAH A
Address: 3 AVE J
City-St-Zip: MOORE HAVEN, FL 33471

Title: D
Name: FORBES, JANICE
Address: 201 W. DELMONTE AVE.
City-St-Zip: CLEWISTON, FL 33440

Title: VD
Name: FORBES, JIM DOCTOR
Address: 201 W DELMONTE AVE
City-St-Zip: CLEWISTON, FL 33440

Title: D
Name: MERCER, DAVID PASTOR
Address: 499 AVENUE N
City-St-Zip: MOORE HAVEN, FL 33471

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: DEBORAH A. TUEL

P

04/12/2010

Electronic Signature of Signing Officer or Director

Date