2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Aug 03, 2006 8:00 am Secretary of State 08-03-2006 90003 020 ****61.25

DOCUMENT # N9700002993 1. Entity Name GREATER APOSTLE FAITH CHURCH, INC.							08-03-2006 9	90003 02	:0 ****61	.25
Principal Place of Business 17111 S.W. MAGNOLIA STREET INDIANTOWN, FL 34956		800 i # 20	Mailing Address 800 DELLAGO CIRCLE # 201 PALM BEACH GARDENS, FL 33410							
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Sui	Suite, Apt. #, etc.			05152006	Chg-NP	CR2E0	37 (4/06)	
City & State		Cit	City & State			4. FEI Number 65-0783	316			plied For t Applicable
Zip	Country Zip			Country		5. Certificate of	of Status Desired		\$8.75 Add Fee Required	
	6. Name and Address of Curre	nt Registere	d Agent		·	7. Name and	Address of New R	tegistered A	Agent	
DIEDOE E	OTHER LED				Name Name C Dua co					
	ROTHER L-SR. AGO CIRCLE				Street Address & O. Box Number is Not Acceptable)					
#_210	AGO GIRGEE				300 Del Lago Circle					
	CH GARDENS, PL 33410				<u>.π</u> Э	ر 10۔				
THEM BEACH CARDENO, I'E 354 TO					CityPolo	0 1	Gardens	FL	Zip Code	
	named entity submits this statementions of registered agent.	t for the purp	ose of changing its	register	ed office or registe	ered agent, or both	n, in the State of Flo	orida. I am f	familiar with,	and accept
SIGNATURE .	Delay S Pierce Signature, typed or printed name of registered ag	2		· Baantara			May	30,	2004	
		era ana una mapp	ecable. (NOTE	: negiziere	d Agent signature require	ed when reinstating)	\cup	DATE		
D	Filing Fee is \$61.25 ue by September 6, 2006		9. Election Carr Trust Fund C	npaign F	inancing	\$5.00 May Be Added to Fees	, M		payable to	
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indicated on this report or supplemental report is frue and accurate and that my signature shall have the same legal effect as it made under oalt; 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 775-4518