

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 27, 2004 8:00 am
Secretary of State

05-27-2004 90018 018 ****61.25

DOCUMENT # N97000003564

1. Entity Name
Northside Agape Ministries, Inc.



DO NOT WRITE IN THIS SPACE

24077351

2. Principal Place of Business
3790 45th St

3. Mailing Address

Suite, Apt. #, etc.
Vero Beach

Suite, Apt. #, etc.

City & State
FL

City & State Same

4. FEI Number
59-3449353

Applied For
Not Applicable

Zip
32967

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Henry Burson, Jr.

Street Address (P.O. Box Number is Not Acceptable)
4545 38th Ave

City Vero Beach

FL Zip Code 32967

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FEE IS \$61.25
Initial or Amended UBR**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pastor Henry Burson, Jr. P 4545 38th Ave Vero Beach, FL 32967
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Co-pastor Hallie Curtis W. Burson V 4545 38th Ave Vero Beach, FL 32967
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Clayton Broxton T 4530 5th Ave Vero Beach, FL 32967
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Margaret Thornton D 4696 5th Ave Vero Beach, FL 32967
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Brenda Jones D 4680 5th Ave Vero Beach, FL 32967

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Henry Burson, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-24-04
Date

Daytime Phone #

CR2E037B (12/02)