

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 12, 2009
Secretary of State**

DOCUMENT# N98000000020

Entity Name: APOSTOLIC WORSHIP CENTER OF HOMESTEAD, INC.

Current Principal Place of Business:

5 NE 1ST ROAD
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

5 NE 1ST ROAD
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 65-0803766 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: GREATHOUSE, KENNETH
Address: 5 N.E. 1ST RD
City-St-Zip: HOMESTEAD, FL 33030

Title: S () Delete
Name: GREATHOUSE, PEGGY
Address: 5 N.E. 1 ST RD
City-St-Zip: HOMESTEAD, FL 33030

Title: D () Delete
Name: EVELAND, RON
Address: 5 N.E. 1ST RD
City-St-Zip: HOMESTEAD, FL 33030

Title: D () Delete
Name: VENNING, SIDNEY
Address: 5 N.E. 1ST RD
City-St-Zip: HOMESTEAD, FL 33030

Title: D () Delete
Name: VENNING, RODDY
Address: 5 N.E. 1ST RD
City-St-Zip: HOMESTEAD, FL 33030

Title: D () Delete
Name: CHUNG, ANDAIL
Address: 5 NE 1 ST ROAD
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: KENNETH GREATHOUSE

PRES

02/12/2009

Electronic Signature of Signing Officer or Director

Date