

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001681

FILED
Jan 25, 2006
Secretary of State

Entity Name: AGAPE' PERFECTING PRAISE AND WORSHIP CENTER, INC.

Current Principal Place of Business:

320 S IVEY LANE
ORLANDO, FL 32811 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 618421
ORLANDO, FL 32861

New Mailing Address:

FEI Number: 59-3395878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RILEY, SHARON
1896 GAMMON LANE
ORLANDO, FL 32811 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: T () Delete
Name: FELTON, STEPHANIE A
Address: 1610 WILLIE MAYS PKWY
City-St-Zip: ORLANDO, FL 32811

Title: D () Delete
Name: RILEY, CONNIE
Address: 4391 COUNCIL COURT
City-St-Zip: ORLANDO, FL 32811

Title: D () Delete
Name: SANDERS, ROBERT
Address: 595 W. CHURCH STREET, #225
City-St-Zip: ORLANDO, FL 32805

Title: D () Delete
Name: HOUGH, JESSE
Address: 3326 SASSQUIN CT
City-St-Zip: ORLANDO, FL 32818

Title: P () Delete
Name: RILEY, SHARON
Address: 1896 GAMMON LANE
City-St-Zip: ORLANDO, FL 32811

Title: SD () Delete
Name: FANT, PATRICIA
Address: 5206 LIMELIGHT CIRCLE, #4
City-St-Zip: ORLANDO, FL 32839

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BELLAMY, BENNIE
Address: 4523 ARCH STREET
City-St-Zip: ORLANDO, FL 32808

Title: P (X) Change () Addition
Name: RILEY, CONNIE
Address: 4391 COUNCIL COURT
City-St-Zip: ORLANDO, FL 32811

Title: TD (X) Change () Addition
Name: SANDERS, ROBERT
Address: 595 W. CHURCH STREET, #225
City-St-Zip: ORLANDO, FL 32805

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

Title: S (X) Change () Addition
Name: RILEY, SHARON
Address: 1896 GAMMON LANE
City-St-Zip: ORLANDO, FL 32811

Title: D (X) Change () Addition
Name: FANT, PATRICIA
Address: 5206 LIMELIGHT CIRCLE, #4
City-St-Zip: ORLANDO, FL 32839

I hereby certify that the information supplied with this filing does not qualify for the 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: SHARON RILEY

S

01/25/2006

Electronic Signature of Signing Officer or Director

Date