

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001681

FILED
May 14, 2008
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)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RILEY, SHARON Y
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: D () Delete
Name: BELLAMY, BENNIE
Address: 4523 ARCH STREET
City-St-Zip: ORLANDO, FL 32808

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

Title: TD () Delete
Name: LAWRENCE, SONYA
Address: 607 SPICE TRADER WAY, APT. H
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: CARTER, DARRELL
Address: 4832 ANZIO STREET
City-St-Zip: ORLANDO, FL 32819

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

Title: D () Delete
Name: FANT, PATRICIA
Address: 710 ARLINGTON STREET
City-St-Zip: ORLANDO, FL 32801

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
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City-St-Zip:

Title: () Change () Addition
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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: SHARON Y. RILEY

S

05/14/2008

Electronic Signature of Signing Officer or Director

Date