

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000080033

FILED  
Mar 12, 2004  
Secretary of State

Entity Name: AGAPE COUNSELING SERVICES, INC.

## Current Principal Place of Business:

5725 NE 14 AVE  
FT LAUDERDALE, FL 33334

## New Principal Place of Business:

10699 LAGO WELLEBY DRIVE  
SUNRISE, FL 33351

## Current Mailing Address:

P.O. BOX 5032  
DEERFIELD BEACH, FL 33442 US

## New Mailing Address:

FEI Number: 65-0449971      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MIKKELSEN, KARL  
5725 NE 14 AVE  
FT LAUDERDALE, FL 33334 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: MIKKELSEN, MARILYN  
Address: 5725 NE 14 AVE  
City-St-Zip: FT LAUDERDALE, FL 33334

Title: VPT ( ) Delete  
Name: KARL, MIKKELSEN  
Address: 5725 NE 14 AVE.  
City-St-Zip: FT. LAUDERDALE, FL 33334

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARILYN MIKKELSEN

PRES

03/12/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date