

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # P96000046578 (6)

1. Corporation Name

AGAPE INFORMATION SYSTEMS, INC.

Principal Place of Business

403 HAWTHORNE COURT
INDIAN HARBOUR BEACH FL 32937

Mailing Address

403 HAWTHORNE COURT
INDIAN HARBOUR BEACH FL 32937

FILED

97 SEP -3 AM 7:18

SECRETARY OF STATE
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/24/1996

3a. Date of Last Report

2. Principal Place of Business

21 594 LAKE VICTORIA Circle

Suite, Apt. #, etc.

22

City & State

23 Melbourne FL

Zip

24 32940

Country

25 US

2a. Mailing Address

26 594 LAKE VICTORIA Circle

Suite, Apt. #, etc.

27

City & State

28 Melbourne FL

Zip

29 32940

Country

30 US

4. FEI Number

59-3376229

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fee

8. This corporation has paid the current year intangible
Personal Property Tax due on 9/30/97 Yes ☒ No ☐

9. Name and Address of Current Registered Agent

SCHOVANEC, DIANE L
403 HAWTHORNE COURT
INDIAN HARBOUR BEACH FL 32937

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

594 LAKE VICTORIA Circle

83

84 City

Melbourne

FL

85 Zip Code

32940

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Diane Schovane Pres.

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

(NOTE: Registered Agent signature required when reinstating)

8/24/97

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

CHIEF INFORMATION OFFICER
PAUL ANDERSON
594 LAKE VICTORIA Circle
Melbourne FL 32940

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PRESIDENT
DIANE SCHOVANE
594 LAKE VICTORIA Circle
Melbourne FL 32940

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

8/24/97

107-752-9174

CR2E034 (4/97)

②

August 21, 1997

Annual Reports Filings
Division of Corporations
Post Office Box 6237
Tallahassee FL 32314

To Whom it may concern:

I am hoping you can help me in this matter. We never received any original copy of the enclosed report prior to the deadline date. We called your office to obtain a copy of the report a week before the filing deadline in an attempt to file in a timely manner. The enclosed copy of a report for a non-profit organization was sent to me in the wrong company name. The problem with this was, as I had stated to the clerk, is that we are a profit company. The enclosed letter was not sent for five days after the original call was made, which would have made the filing late in any case. We then called back and asked to have the proper papers sent twice more. The result was getting the filing we have now enclosed asking for much more than would have been owed if the proper forms had been mailed to us in a timely manner by your office. We ask you, as a result of this misunderstanding, to accept our original fee as would have been paid, rather than the tardy fee mentioned on the form. Thank you in advance for your careful consideration to this matter.

Sincerely,



Paul J Anderson
Agape Information Systems