

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.**  
**AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).**

6125

AMENDED PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**FILED**

98 SEP 29 PM 3:43

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # 1. Corporation Name  
 Agape Property Management, Inc. #29674

Principal Place of Business Mailing Address  
 2170 S.R. 434 West #330  
 Longwood, FL 32779

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2170 S.R. 434 West	2a. Mailing Address 26 2170 S.R. 434 West	4. FEI Number 59-3047066	Applied For Not Applicable
22 Suite, Apt. #, etc. #384	27 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 City & State Longwood, FL	28 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Zip 32779	25 Country Seminole	29 Zip	30 Country
9. Name and Address of Current Registered Agent James F. Heekin, Jr. 215 N. Eola Drive Orlando, FL 32801		10. Name and Address of New Registered Agent Marilyn Campbell 1135 Pisgah Drive Altamonte Springs, FL 32714	

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 hereby accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *Marilyn Campbell* Marilyn Campbell DATE: 9/28/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PDST <input checked="" type="checkbox"/> DELETE	NAME Donald J. Hachenberger	11 TITLE PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME Marilyn Campbell
STREET ADDRESS 2170 S.R. 434 West, Suite 330	CITY-STATE-ZIP Longwood, FL 32779	12 NAME	13 STREET ADDRESS 1135 Pisgah Drive
TITLE V <input checked="" type="checkbox"/> DELETE	NAME Marilyn Campbell	13 CITY-STATE-ZIP Altamonte Springs, FL 32714	21 TITLE S. & Tres. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	CITY-STATE-ZIP	22 NAME Doris Ryan	23 STREET ADDRESS 114 Juniper Lane
TITLE <input type="checkbox"/> DELETE	NAME	24 CITY-STATE-ZIP Longwood, FL 32779	31 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-STATE-ZIP	32 NAME	41 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <input type="checkbox"/> DELETE	NAME	42 NAME	43 STREET ADDRESS
STREET ADDRESS	CITY-STATE-ZIP	44 CITY-STATE-ZIP	51 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <input type="checkbox"/> DELETE	NAME	52 NAME	53 STREET ADDRESS 300002651589
STREET ADDRESS	CITY-STATE-ZIP	53 STREET ADDRESS	54 CITY-STATE-ZIP -09/29/98--01054--021
TITLE <input type="checkbox"/> DELETE	NAME	54 CITY-STATE-ZIP	61 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-STATE-ZIP	62 NAME	63 STREET ADDRESS ****146.25 ****61.25
TITLE <input type="checkbox"/> DELETE	NAME	63 STREET ADDRESS	64 CITY-STATE-ZIP
STREET ADDRESS	CITY-STATE-ZIP	64 CITY-STATE-ZIP	

14. I, the signatory, certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information made available 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. If I am an officer or a 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: *Marilyn Campbell* Marilyn Campbell 9/28/98

CR2E034 (5/98)