

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000011399

**Entity Name:** NOAH'S AGAPE CAFE, INC.

**Current Principal Place of Business:**

14679 DURBIN ISLAND WAY  
JACKSONVILLE, FL 32259

**Current Mailing Address:**

14679 DURBIN ISLAND WAY  
JACKSONVILLE, FL 32259 UN

**FEI Number: 87-3023770**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SCHWARTZ, REBECCA  
14679 DURBIN ISLAND WAY  
JACKSONVILLE, FL 32259 US

*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

**Officer/Director Detail :**

Title P  
Name SCHWARTZ, REBECCA  
Address 14679 DURBIN ISLAND WAY  
City-State-Zip: JACKSONVILLE FL 32259

Title VP  
Name BAUER, WAYNE  
Address 248 N LAKE CUNNINGHAM AVE  
City-State-Zip: ST JOHNS FL 32259

Title EXECUTIVE DIRECTOR  
Name BARNES, JOHN  
Address 14982 DURBIN COVE WAY  
City-State-Zip: JACKSONVILLE FL 32259

Title ASST. SECRETARY  
Name FREDERICK, CINDY  
Address 7039 ROSABELLA CIRCLE  
City-State-Zip: JACKSONVILLE FL 32258

Title SECRETARY  
Name LOWERY, NICOLE  
Address 69 INDIAN GRASS DRIVE  
City-State-Zip: ST.JOHNS FL 32259

*I hereby 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 all other like empowered.*

**SIGNATURE: REBECCA SCHWARTZ**

**PRESIDENT OWNER**

**04/08/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date