2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005
Secretary of State

DOCUMENT# N03000004919

Entity Name: ABUNDANT HARVEST INTERNATIONAL FELLOWSHIP MINISTRIES, INC.

Current Principal Place of Business:

3401 PIONEER ROAD
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

PO BOX 585146
ORLANDO, FL 328585146

New Mailing Address:

FEI Number: 03-0521674 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

MINGLEDOFF, BERNARD
8419 VERMANTH ROAD
JACKSOMVILLE, FL 32211 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: PD ( ) Delete
Name: MINGLEDOFF, BERNARD
Address: 8419 VERMANTH ROAD
City-St-Zip: JACKSONVILLE, FL 32211

Title: VD ( ) Delete
Name: MINGLEDOFF, VELDA
Address: 8419 VERMANTH ROAD
City-St-Zip: JACKSONVILLE, FL 32211

Title: SD ( ) Delete
Name: MAGEE, LAVONIA
Address: 4764 FIRESIDE DRIVE W
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete
Name: ADAMS, SYLVIA
Address: 7201 ARLINGTON EXPRESSWAY, #106
City-St-Zip: JACKSONVILLE, FL 32211

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
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BERNARD MINGLEDOFF PD 05/04/2005

Electronic Signature of Signing Officer or Director — Date