

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 19, 2004
Secretary of State**

DOCUMENT# N30090

Entity Name: ABE SPRINGS BAPTIST CHURCH, INC.

Current Principal Place of Business:

13913 SW CR 275
BLOUNTSTOWN, FL 32424

New Principal Place of Business:

Current Mailing Address:

13913 SW CR 275
BLOUNTSTOWN, FL 32424

New Mailing Address:

FEI Number: 59-2933802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDANIEL, ELTON
18966 NE HAYES SUBDIVISION RD
BLOUNTSTOWN, FL 32424 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: D () Delete
Name: BROWN, SHIRLEY F
Address: 8246 NE SR 715
City-St-Zip: BLOUNTSTOWN, FL

Title: D () Delete
Name: FOLSOM, DALE
Address: 18948 NW TERRY RD
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: D () Delete
Name: JOHNSON, RODNEY E
Address: 7901 SW MONROE JOHNSON ROAD
City-St-Zip: KINARD, FL 32449

Title: D () Delete
Name: CHANDLER, CARLTON
Address: HWY 71 SOUTH
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: STD () Delete
Name: PITTS, BETTY
Address: 13608 SW CR 275
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: DP () Delete
Name: HAND, BONNIE
Address: 13151 SR 715
City-St-Zip: BLOUNTSTOWN, FL 32424

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: D (X) Change () Addition
Name: CHANDLER, CARLTON
Address: 4024 SR 71 S
City-St-Zip: KINARD, FL 32449

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: ELTON MCDANIEL

RA

03/19/2004

Electronic Signature of Signing Officer or Director

Date