


FILE NOW: FILING FEE IS \$61.25

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Mar 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **769928** (3)

1. Corporation Name

PENSACOLA ABUNDANT LIFE CHURCH, INC.

Principal Place of Business

Mailing Address

**8025 N. PALAFOX STREET
PENSACOLA FL 32534**

**8025 N. PALAFOX STREET
PENSACOLA FL 32534**



3. Date Incorporated or Qualified

08/22/1983

4. FEI Number

59-2369324 59-3490993

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PEADEN, REV. ADDISON
8025 N. PARAFOX STREET
PENSACOLA FL 32534**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	RD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PEADEN, REV. ADDISON		1.2 NAME	GLENNIS PEADEN	
STREET ADDRESS	5828 TWIN OAKS DR.		1.3 STREET ADDRESS	5828 TWIN OAKS DR.	
CITY - ST - ZIP	PACE FL		1.4 CITY - ST - ZIP	PACE, FL 32571	
TITLE	VD	<input type="checkbox"/> DELETE	2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIVETTE, STEVE		2.2 NAME		
STREET ADDRESS	5168 ROWE TRAIL		2.3 STREET ADDRESS		
CITY - ST - ZIP	PACE FL		2.4 CITY - ST - ZIP		
TITLE	SD	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GORDON, SUSAN D.		3.2 NAME	Opal Messer	
STREET ADDRESS	4101 BONWAY DR.		3.3 STREET ADDRESS	7478 Woodside Rd.	
CITY - ST - ZIP	PENSACOLA FL		3.4 CITY - ST - ZIP	Pensacola, FL 32526	
TITLE	TD	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CLEARY, REGGIE		4.2 NAME	Linda D. Segraves	
STREET ADDRESS	P.O. BOX 888 N/A		4.3 STREET ADDRESS	5812 Twin Oaks Dr.	
CITY - ST - ZIP	ROBERTSDALE AL		4.4 CITY - ST - ZIP	Pace, FL 32571	
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - ST - ZIP		

14. I 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Glennis Peaden* Glennis Peaden 3/17/98 (850) 994-7256

CR2E037 (10/97)