

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2005 8:00 am**  
**Secretary of State**

04-27-2005 90358 043 \*\*\*\*61.25

**DOCUMENT # N01000000303**

1. Entity Name  
**ABUNDANT FRUITS, INC.**



Principal Place of Business  
**1000 BETHUNE DR.  
ORLANDO, FL 32805**

Mailing Address  
**1000 BETHUNE DR.  
ORLANDO, FL 32805**

**20049608**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04252005 Chg-NP CR2E037 (10/03)

4. FEI Number  
**04-3641944**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**NEMBARD, RALSTON B  
8413 CLEMATIS LANE  
ORLANDO, FL 32819**

**7. Name and Address of New Registered Agent**

Name **Betty Zanders**  
Street Address (P.O. Box Number is Not Acceptable)  
**119-C Georgetown, Drive**  
City **Casselberry** FL Zip Code **32707**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Betty Zanders**  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**04/25/05**  
DATE

**Filing Fee is \$61.25  
Due by May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOURNE, EDDIE 6324 POWERS POINT CIRCLE ORLANDO, FL 32818 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, BYRON 4249 GAITHER DR. ORLANDO, FL 32811 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEMBARD, RALSTON B 8413 CLEMATIS LANE ORLANDO, FL 32819 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ASH, DOUGLAS 1000 DRIFT CREED COVE ORLANDO, FL 32828 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAWKINS, ERNESTINE 1105 CORETTA WAY ORLANDO, FL 32805 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMPSON, ANNETTE 3025 WILLIE MAYS PKWY ORLANDO, FL 32811 <input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Nellie Tisdale, President</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>2402 Ashland Blvd Orlando, FL 32808</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Torry Thomas, Directors</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>Ivey Lane Orlando, FL 32</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Betty Zanders, Director</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>119-C Georgetown Blvd. Casselberry, FL 32707</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Nellie Tisdale, President**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**04/25/05**  
Date

**407-295-0118**  
Daytime Phone #