

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N01000001067

1. Entity Name
ABUNDANT LIFE CHRISTIAN CENTER MINISTRIES
INCORPORATED



Principal Place of Business
3703 PRUDENCE DRIVE
SARASOTA, FL 34235

Mailing Address
3703 PRUDENCE DRIVE
SARASOTA, FL 34235

FILED

05 SEP 14 AM 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

09072005

Chg-NP

CR2E037 (10/03)

4. FEI Number
65-1078910

Applied For
Not Applicable

5. Certificate of Status Desired

~~X~~ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LUMPKIN, KELVIN L
3703 PRUDENCE DR.
SARASOTA, FL 34235

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME LUMPKIN, KELVIN L
STREET ADDRESS 3703 PRUDENCE DR.
CITY-ST-ZIP SARASOTA, FL 34234 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME BACON, EULA T
STREET ADDRESS 1547 30TH ST.
CITY-ST-ZIP SARASOTA, FL 34234 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME LUMPKIN, DELORES
STREET ADDRESS 3703 PRUDENCE DR
CITY-ST-ZIP SARASOTA, FL 34235 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME EVERETT, LESLEY
STREET ADDRESS 1318 20TH ST.
CITY-ST-ZIP SARASOTA, FL 34234 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME SIDNEY, DOUGLAS
STREET ADDRESS 2515 24TH STREET
CITY-ST-ZIP SARASOTA, FL 34234 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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: Eula T. Bacon Eula T. Bacon - S

09/07/05 (941) 809-5679

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #