2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008909

FILED Feb 07, 2005 Secretary of State

Entity Name: ABUNDANT JOY CHRISTIAN FELLOWSHIP, INC.

Current P	urrent Principal Place of Business:			New Principal Place of Business:		
999 BLANDING BLVD., STE. 5 & 6 ORANGE PARK, FL 32065				3382 PEORIA RD ORANGE PARK, FL 32067		
Current M	lailing Addres	ss:	New Mailin	ng Address:		
999 BLANDING BLVD., STE. 5 & 6 ORANGE PARK, FL 32065				P O BOX 1249 ORANGE PARK, FL 32067		
FEI Number	: 59-3630117	FEI Number Applied For()	FEI Number Not Appli	cable () Certificate of Status Desired ()		
Name and	Address of (Current Registered Agent:	Name and	Address of New Registered Agent:		
462 KINGS ORANGE The above	JOHN F JR SLEY AVE, ST PARK, FL 320 named entity e of Florida.	068 US	urpose of changing it	s registered office or registered agent, or b		
SIGNATUI	RE:					
	Electro	nic Signature of Registered Age	nt	Date		
OFFICER	S AND DIREC	TORS:	ADDITION	S/CHANGES TO OFFICERS AND DIREC		
Title: Name: Address: City-St-Zip:	D (TAYLOR, DON 2768 CACTUS ORANGE PARI	DR.	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D (MCGILL, JAME 326 EVENTIDE ORANGE PARI	EDR.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (ADAMS, DAVID 2824 LIMESTO ORANGE PARI	DNE CT.	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D (REED, JOSEP 2660 SHANNO ORANGE PARI	N ST.	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D (BRYANT, ROB 8855 BANDER JACKSONVILL	A CIR S	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (DIXON, DIANE 2171 SAN PAB MIDDLEBURG	SLO CT	Title: Name: Address: City-St-Zip:	D (X) Change () Addition WRIGHT, SANDRA 3334 DEERFIELD POINT ORANGE PARK, FL 32073		

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: JAMES E. MCGILL D 02/07/2005