2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2005
Secretary of State

DOCUMENT# N04000006636

Entity Name: ABUNDANT FAITH COMMUNITY CHURCH, INC.

Current Principal Place of Business:

639 SAFEHARBOUR DR
OCOEE, FL 34761

New Principal Place of Business:

Current Mailing Address:

639 SAFEHARBOUR DR
OCOEE, FL 34761

New Mailing Address:

FEI Number: 20-1318020 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CLENNEY, CHARLES M
6845 KNIGHTSWOOD DR
ORLANDO, FL 32818 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:	DC	( ) Delete
Name:	BOGGS, PAM	
Address:	604 JAY ST	
City-St-Zip:	OCOEE, FL 34761	
Title:	DS	( ) Delete
Name:	BOWES, DAVID	
Address:	1107 CLIMBING ROSE DR	
City-St-Zip:	ORLANDO, FL 32818	
Title:	DVC	(X) Delete
Name:	GRAHAM, LORENZO	
Address:	2097 CASABA COVE AVE	
City-St-Zip:	OCOEE, FL 34761	
Title:	DT	( ) Delete
Name:	CAMPBELL, ROSE	
Address:	1600 CHATHAM CIR	
City-St-Zip:	APOPKA, FL 32703	
Title:	DT	( ) Delete
Name:	FORRESTER, LESMA	
Address:	13326 VIA ROMA CIR	
City-St-Zip:	CLERMONT, FL 34711	
Title:	TD	( ) Delete
Name:	HARRELL, JOANN	
Address:	6117 INDIAN HILL RD	
City-St-Zip:	ORLANDO, FL 32808	

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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: PAM BOGGS DC 05/09/2005

Electronic Signature of Signing Officer or Director — Date