2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2008
Secretary of State

DOCUMENT# N04000008309

Entity Name: ABUNDANT LIFE PRAISE FELLOWSHIP CHURCH, INC.

Current Principal Place of Business:

20 ACADEMY AVE
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

PO BOX 621418
OVIEDO, FL 32762

New Mailing Address:

FEI Number: 16-1708184 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHAW, JOSEPH
963 COURTLAND BLVD.
DELTONA, FL 32738 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: T ( ) Delete
Name: DANIELS, LEWIS W
Address: 4346 HEIRLOOM ROSE PLACE
City-St-Zip: OVIEDO, FL 32766

Title: T ( ) Delete
Name: SHAW, JOSEPH
Address: 963 COURTLAND BLVD.
City-St-Zip: DELTONA, FL 32765

Title: T ( ) Delete
Name: POMMELLS, ERROL
Address: 1600 MURPHY ST.
City-St-Zip: OVIEDO, FL 32765

Title: T ( ) Delete
Name: COOPER, PERRY
Address: 2716 CHADDSFORD CIR.
City-St-Zip: OVEIDO, FL 32765

Title: T ( ) Delete
Name: ALEXANDER, MINNIE
Address: 330 REED RD.
City-St-Zip: OVEIDO, FL 32765

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOSEPH SHAW T 02/18/2008

Electronic Signature of Signing Officer or Director — Date