

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008336

FILED
Mar 13, 2009
Secretary of State

Entity Name: ABUNDANT LIFE MINISTRIES FELLOWSHIP CHURCH INC

Current Principal Place of Business:

3462 5TH AVENUE NORTH
SAINT PETERSBURG, FL 33713

New Principal Place of Business:

Current Mailing Address:

3462 5TH AVENUE NORTH
SAINT PETERSBURG, FL 33713

New Mailing Address:

FEI Number: 51-0594817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STROMAN, EVELYN
3462 5TH AVENUE NORTH
SAINT PETERSBURG, FL 33713 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: P () Delete
Name: STROMAN, BISHOP R JR.
Address: 3462 5TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: VP () Delete
Name: STROMAN, EVELYN
Address: 3462 5TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: S/T () Delete
Name: WHITMIRE, MINNIE E
Address: 8400 49TH STREET N, APT. 1906
City-St-Zip: PINELLAS PARK, FL 33781

Title: TRUS () Delete
Name: GUESS-BROWN, JOYCE
Address: 2001 14TH AVENUE S
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: TRUS () Delete
Name: MILLER, WILLIE J
Address: 843 UNION ST. S, APT. D
City-St-Zip: SAINT PETERSBURG, FL 33712

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: BISHOP R. STROMAN, JR.

P

03/13/2009

Electronic Signature of Signing Officer or Director

Date