

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24045

FILED
Apr 29, 2004
Secretary of State

Entity Name: ABUNDANT LIFE CHRISTIAN ASSEMBLY, INC.

Current Principal Place of Business:

343 NE 1ST AVE
OCALA, FL 34470 US

New Principal Place of Business:

Current Mailing Address:

1925 NW 60TH AVE
OCALA, FL 34478 US

New Mailing Address:

FEI Number: 59-2890422

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOUNG, JAMES M., JR.
1925 NW 60TH AVE.
OCALA, FL 34482 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: PD () Delete
Name: YOUNG, JAMES M., JR.,
Address: 1925 NW 60TH AVE
City-St-Zip: OCALA, FL

Title: SD () Delete
Name: DICKERMAN, MARK
Address: 5636 NW 49TH PLACE
City-St-Zip: OCALA, FL 34482

Title: VD () Delete
Name: GIBBS, MATTHEW
Address: 3331 NW 2ND AVE
City-St-Zip: OCALA, FL 34475

Title: TD () Delete
Name: GREEN, HOWARD
Address: 44 ALMOND TRAIL
City-St-Zip: OCALA, FL 34472

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: SHEILA GIBBS,
Address: 3331 NW 2ND AVE
City-St-Zip: OCALA, FL 34475

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: SHEILA GIBBS

SD

04/29/2004

Electronic Signature of Signing Officer or Director

Date