

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27172

FILED
Jan 23, 2006
Secretary of State

Entity Name: ABUNDANT LIFE FAMILY CHURCH, INC.

Current Principal Place of Business:

300 NORTH HIGHLAND
TARPON SPRINGS, FL 34688 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1943
TARPON SPRINGS, FL 34688 US

New Mailing Address:

FEI Number: 59-2925342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, GLENN E
1439 FLATWOOD COURT
TRINITY, FL 34655 US

Name and Address of New Registered Agent:

MORRIS, GLENN E
11628 LEDA LN.
NEW PORT RICHEY, FL 34654 US

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:

01/23/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORRIS, GLENN E
Address: 1439 FLATWOOD COURT
City-St-Zip: TRINITY, FL 34655

Title: V () Delete
Name: WENSTROM, STEPHEN
Address: 9017 CALLAWAY DRIVE
City-St-Zip: TRINITY, FL 34655

Title: D () Delete
Name: THOMPSON, JOHN R
Address: 366 STEEPLECHASE LANE
City-St-Zip: PALM HARBOR, FL 34684

Title: D () Delete
Name: DATTILO, VINCENT
Address: 3111 KILBURN ROAD
City-St-Zip: HOLIDAY, FL 34691

Title: D () Delete
Name: MARTIN, MIKE
Address: P.O. BOX 209
City-St-Zip: STEPHENVILLE, TX 76401

Title: D () Delete
Name: ADAMS, JIM
Address: 10643 COUNTY ROAD A
City-St-Zip: BRYAN, OH 43506

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MORRIS, GLENN E
Address: 11628 LEDA LN
City-St-Zip: NEW PORT RICHEY, FL 34654

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: D (X) Change () Addition
Name: MARTIN, MIKE
Address: P.O. BOX 123075
City-St-Zip: FT. WORTH, TX 76121

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 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: GLENN MORRIS

PRES

01/23/2006

Electronic Signature of Signing Officer or Director

Date