

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # N28578 (5)

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1. Corporation Name

LIFE-GIVING EVANGELISTIC MINISTRIES, INC. - ABU
NDANT LIFE CHURCH OF GOD IN CHRIST

Principal Place of Business

Mailing Address

12124 WILDBROOK DR / RIVERVIEW 33569
PO BOX 2754
BRANDON FL 33509-9754

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PO BOX 2754
BRANDON FL 33509-9754

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/28/1988

3a. Date of Last Report
01/25/1994

4. FEI Number

95-3986359

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 1721 LAKE CREST AV

25 PO BOX 2754

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒ \$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILDER, BESSIE
1906 GRACE STREET
TAMPA FL 33607

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME BARNES, MATTHEW Q.
STREET ADDRESS 12124 WILDBROOK DR.
CITY-ST-ZIP RIVERVIEW FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

P ☒ Change ☐ Addition
BARNES, MATTHEW Q.
1721 LAKE CREST AV.
BRANDON, FL

TITLE D
NAME FERGUSON, KAREN
STREET ADDRESS 12124 WILDBROOK DR.
CITY-ST-ZIP RIVERVIEW FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

D ☒ Change ☐ Addition
EDWARDS, PHILLIP
708 BLOOMINGFIELD DR.
BRANDON, FL

TITLE D
NAME WILDER, BESSIE
STREET ADDRESS 1906 GRACE STREET
CITY-ST-ZIP TAMPA FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☒ Change ☐ Addition

TITLE D
NAME BLACK, VERNIE FAYE
STREET ADDRESS 3205 DELEUIL AVE.
CITY-ST-ZIP TAMPA FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☒ Change ☐ Addition
3205 DELEUIL AVE.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: MATTHEW Q. BARNES, PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR, OFFICER OR DIRECTOR

Matthew Q. Barnes

1/17/95 (813) 651-4440