2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED May 29, 2009 DOCUMENT# N30580 Secretary of State

Entity Name: ABUNDANT HARVEST CHURCH, INC. OF CENTRAL FLORIDA

Current Principal Place of Business: New Principal Place of Business:

333 S. POINCIANA BLVD. KISSIMMEE, FL 34746

Current Mailing Address: New Mailing Address:

2326 IRLO CT 2390 SUE DR

KISSIMMEE, FL 34741 KISSIMMEE, FL 34741

FEI Number: 59-3004190 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JONES, GARY W CLARK, DOUGLAS B 1690 S LYNDELL DR 2326 IRLO COURT

US KISSIMMEE, FL 34741 US KISSIMMEE, FL 34741

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: DOUGLAS B CLARK 05/29/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

JONES, GARY W JONES, CYRIL M Name: Name: 2326 IRLO COURT Address: 2390 SUE DR Address: City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: KISSIMMEE, FL 34741

Title: VD (X) Delete Title: () Change () Addition

JONES, CYRIL M Name: Name: Address: 2390 SUE DRIVE Address: City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip:

Title: () Delete Title: () Change () Addition

COPELAND, THOMAS L Name: Name: 6211 CHINABERRY DR. Address: Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip:

Title: TD () Delete Title: TD (X) Change () Addition

Name: CLARK, DOUGLAS B Name: CLARK, DOUGLAS B 16990 S LYNDEN DRIVE 1690 S LYNDELL DRIVE Address: Address: City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: KISSIMMEE, FL 34741

Title: Title: () Delete () Change () Addition

JONES, ELAINE C Name: Name: 2390 SUE DRIVE Address: Address: KISSIMMEE, FL 34741 City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change () Addition

JONES, SARAH G JONES, SARAH G Name: Name: 2390 SUE DR Address: 2326 IRLO COURT Address: KISSIMMEE, FL 34741 KISSIMMEE, FL 34741 City-St-Zip: 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: CYRIL M JONES PD 05/29/2009