2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2005
Secretary of State

DOCUMENT# N35630

Entity Name: ABUNDANT LIFE FELLOWSHIP OF TALLAHASSEE, INCORPORATED

Current Principal Place of Business:

1477 CAPITAL CIR NW
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

3881 NORTH MONROE ST.
TALLAHASSEE, FL 32303 US

Current Mailing Address:

PO BOX 180370
TALLAHASSEE, FL 32318 US

New Mailing Address:

FEI Number: 59-2974355 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLENDER, ELAINE DVS
5993 PONDER LANE
TALLAHASSEE, FL 32309 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: MILLENDER, LARRY J
Address: 1477 CAPITAL CIRCLE NW
City-St-Zip: TALLAHASSEE, FL 32303

Title: VD ( ) Delete
Name: MILLENDER, ELAINE
Address: 1477 CAPITAL CIRCLE NW
City-St-Zip: TALLAHASSEE, FL 32303

Title: TD ( ) Delete
Name: DANIEL, CHARLES
Address: 1477 CAPITAL CIRCLE NW
City-St-Zip: TALLLHASSEE, FL 32303

Title: S ( ) Delete
Name: MILLENDER, CLIFF
Address: 1477 CAPITAL CIRCLE NW
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MILLENDER, LARRY J
Address: 5993 PONDER LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: VD (X) Change ( ) Addition
Name: MILLENDER, ELAINE
Address: 5993 PONDER LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD (X) Change ( ) Addition
Name: DANIELS, CHARLES
Address: 2508 WILLAMETTE ROAD
City-St-Zip: TALLLHASSEE, FL 32303

Title: S (X) Change ( ) Addition
Name: MILLENDER, CLIFF
Address: 111 GREENWAY DRIVE
City-St-Zip: HAVANA, FL 32333

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: ELAINE MILLENDER VD 04/19/2005

Electronic Signature of Signing Officer or Director — Date