2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9300000124

FILED Jul 30, 2008 Secretary of State

Entity Name: ABUNDANT LIFE MINISTRIES OF PUTNAM COUNTY, INC

Current Principal Place of Business: New Principal Place of Business: 890 N STATE RD 19 PALATKA, FL 32177 US **Current Mailing Address: New Mailing Address:** 890 N STATE RD 19 PALATKA, FL 32177 US FEI Number: 59-3162070 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CARTER, JERRY A MR WILLIS, CHAD L MR 204 BRANTLEY ROAD 1500 CALMING WATERS DR GRANDIN, FL 32138 US #5506 ORANGE PARK, FL 32003 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: CHAD L. WILLIS 07/30/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WILLIS, RAYMOND L Name: Name: 125 QUAIL LANE Address: Address: City-St-Zip: PALATKA, FL 32177 City-St-Zip: Title: VSD Title: VSD (X) Change () Addition () Delete Name: WILLIS, CHAD Name: WILLIS, CHAD L Address: 6002 5TH MANOR E Address: 1500 CALMING WATERS DR #5506 City-St-Zip: PALATKA, FL 32177 City-St-Zip: ORANGE PARK, FL 32003 Title: () Delete Title: (X) Change () Addition CARTER, JERRY Name: LEE, CHRISTON T Name: 204 BRANTLEY RD 1616 ROSELLE AVE Address: Address: City-St-Zip: GRANDIN, FL 32138 City-St-Zip: PALATKA, FL 32177 Title: () Delete Title: () Change () Addition WILLIS, HENRY L Name: Name: 903 TIERRA WOOD Address: Address: City-St-Zip: PALATKA, FL 32177 City-St-Zip: Title: (X) Delete Title: () Change () Addition LEE, CHRISTON Name: Name: 1616 ROSELLE AVE Address: Address: City-St-Zip: PALATKA, FL 32177 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: CHAD L WILLIS VSD 07/30/2008