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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

N93000002745 (8)

ABUNDANT LIFE CHRISTIAN CHURCH INTERNATIONAL, IN

Principal Place of Business Mailing Address 1933 WILLIAMS MANOR AVE 1933 WILLIAMS MANOR AVE ORLANDO FL 32811-4130 ORLANDO FL 32811-4130 3a. Date of Last Report 3. Date Incorporated or Qualified 05/19/1995 06/14/1993 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 59-3188671 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State 6. Election Campaign Financing \$5.00 May Be City & State Added to Fees Trust Fund Contribution 23 28 8. This corporation has liability for intangible tay under s. 199.032, Country Country Zip Yes Mo 30 Florida Statutes 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name LAMAR, L J 82 Street Address (P.O. Box Number is Not Acceptable) 1933 WILLIAMS MANOR AVE 83 ORLANDO FL 32811 Zip Code 84 City 85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstalling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change ☐ Addition DELETE 1.1 TITLE OPT TITLE LAMAR, L J 1.2 NAME NAME 1933 WILLIAMS MANOR AVE 13 STREET ADDRESS STREET ADDRESS ORLANDO FL 32811 1.4 CITY-ST-ZIP CITY-ST-2/P Change ☐ Addition DELETE 21 TITLE TITLE LOCKLEY, JOD! 22 NAME NAME 1933 WILLIAMS MANOR AVE 2.3 STREET ADDRESS STREET ADORESS ORLANDO FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 31 TITLE TITLE 3.2 NAME NAME DJUAN, IRVIN 7116 CORAL COVE DR. 3.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 3.4. CITY-ST-ZIP CITY-ST-7IP Change Addition DELETE 4.1 TITLE TITLE 4 2 NAME HALL, CAROLYN 4.3 STREET ADDRESS 7709 ARREZZO AVE STREET ADDRESS ORLANDO FL 44 CITY-ST-ZIP CHTY-ST-ZIP ☐ Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change | Addition 6.1 TITLE TITLE NAME 6.2 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

DITY-ST-ZIP

L.J. Lamar PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 exachment with an address.

(12/95)**CR2E037**