## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 N94000003462 (8) DOCUMENT #

ABUNDANT LIFE MINISTERIAL BIBLE SCHOOL AND CHRIS TIAN ACADEMY, INC.

Principal Place of Business

Mailing Address



1801 DAVIE BLVD. FT. LAUDERDALE FL 33312		1801 DAVIE BLVD. FT. LAUDERDALE FL 33312		2. Data la constant of Outlifeed	an Da	o of Las	st Report	
					<ol> <li>Date Incorporated or Qualified 07/08/1994</li> </ol>		08/21/	
2. Principal Plac	ne of Business	2a. Mailing Address			4. FEI Number			Applied For
]		26		65-0337426		Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	IA.	\$8.75 Additional Fee Required		
City & State		City & State	<del></del>		<ol> <li>Election Campaign Financing Trust Fund Contribution</li> </ol>		\$5.00 May Be Added to Fees	
Zip	Country	Zip	Cour	ntry	8. This corporation has liability for	intangible ta	x under	s. 199.032,
	25	29	30		Florida Statutes			
ļ	9. Name and Address of Curren	it Registered Agent			10. Name and Address of New R	legistered /	Agent	
				81 Name				
VIZCARRONDO, FELIPE O ESQ.				82 Street Addr	ress (P.O. Box Number is Not Acceptab	ole)		
4600 S.W	/. 4TH AVE.		1					
	ERDALE FL 33315			83				
			ŀ	84 City			85	Zip Code
					ration submits this statement for the pu	FL	1, 1,	1-1-1-1-1-66
or registere familiar wit	ed agent, or both, in the State of Flori h, and accept the obligations of, Sect			orporation's boa	ration subtritis this statement for the purific of directors. I hereby accept the app		Tegistet	eu agent. i an
SIGNATURE _	Signature, typed or printed name of registered agen			Agent signature require	ad when reinstating)  ADDITIONS/CHANGES TO OFF	DATE:	) DIDEC	TODS IN 12
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OF		Chang	
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AME	JONES, JEROME		1.2 N					
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NAME	JONES, LOIS		22 N					
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NAME	HILL, EDDIE		32 N					
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CITY - ST - ZIP		□DELETÉ	617				☐ Char	nge 🔲 Additio
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NAME				STREET ADORESS				
STREET ADDRESS				VTV CT 710				
CHY-SI-ZIP	L	d with this filing is voluntarily for	rnished and	I does not qualify	for the exemption stated in Section 11	9.07(3)(k), F	Iorida S	tatutes. 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.

CR2E037 (12/95)