


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # N94000004871

1. Entity Name
 THE ABRAHAM FOUNDATION, INC.



Principal Place of Business
 530 NE 91ST STREET
 MIAMI, FL 33138 US

Mailing Address
 P.O. BOX 530883
 MIAMI, FL 33153-0883

DO NOT WRITE IN THIS SPACE



01102005 No Chg-NP CR2E037 (10/03)

4. FEI Number
 65-0339597

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

8. Name and Address of Current Registered Agent

JOHNSON, HELEN P
 530 NE 91ST STREET
 MIAMI, FL 33138

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reissuing) _____ DATE _____

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FIELDS, SARAH 1611 HOMEWOOD AVE. DURHAM, NC 27707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILLIAMS, ANNETTE 201 WINWOOD CIRCLE SEGUIN, TX 78155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JOHNSON, HELEN P 530 NE 91ST ST MIAMI, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HANKERSON, DELIA 530 NE 91ST ST MIAMI, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Helen P. Johnson Date: January 15, 2005 Daytime Phone #: (305) 757-7050

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR