

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 14, 2002 8:00 am
Secretary of State

05-28-2002 91692 004 ****70.00

DOCUMENT # N96000004985

1. Entity Name

ABUNDANT HARVEST CHURCH, INC.

Principal Place of Business

Mailing Address

4220 ORLANDO DR
 SUITE 20
 SANFORD FL 32773
 US

PO BOX 2950
 SANFORD FL 32773
 US

2. Principal Place of Business

INC.

3. Mailing Address

Abundant Harvest Church,
 Suite, Apt. #, etc.
109 W 27th Street

Suite, Apt. #, etc.

City & State
SANFORD, FL

City & State

Zip
32773

Country
USA

Zip

Country

4. FEI Number

59-3406731

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

GREENE, DYCUS & CO., P.A.
% ROGER D. BOWEN
205 NORTH ELM AVE.
SANFORD FL 32771

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renewing)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO GORDON, WILBERT JR. 508 CEDAR CREEK CIR. SANFORD FL 32771	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. GORDON, CAROLYN 508 CEDAR CREEK CIR. SANFORD FL 32771	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GORDON, TAVIS 508 CEDAR CREEK CIR. SANFORD FL 32771	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GORDON, WILBERT III 508 CEDAR CREEK CIR. SANFORD FL 32771	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GORDON, WILBERT JR. 705 PINE AVE Sanford, FL 32771	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GORDON, CAROLYN 705 PINE AVE SANFORD, FL 32771	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GORDON, TAVIS 705 PINE AVE SANFORD, FL 32771	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GORDON, WILBERT III 705 PINE AVE SANFORD, FL 32771	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 817, 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:

Wilbert D. Gordon, JR. Pastor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-6-02 (407) 324-1603

Date

Daytime Phone #

CPRE037 (9/01)