

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001063

FILED
Apr 18, 2007
Secretary of State

Entity Name: ABUNDANT LIFE MINISTRIES OF DAYTONA BEACH, INC.

Current Principal Place of Business:

920 BEVILLE ROAD
DAYTONA BEACH, FL 32114

New Principal Place of Business:

920 BEVILLE ROAD
DAYTONA BEACH, FL 32114 US

Current Mailing Address:

920 BEVILLE ROAD
DAYTONA BEACH, FL 32114

New Mailing Address:

1500 BEVILLE ROAD
SUITE 606-320
DAYTONA BEACH, FL 32114 US

FEI Number: 59-3434037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIPLETT, MARCUS J
920 BEVILLE RD
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

TRIPLETT, MARCUS J
1500 BEVILLE ROAD
SUITE 606-320
DAYTONA BEACH, FL 32114 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: MARCUS J. TRIPLETT

04/18/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: TRIPLETT, MARCUS J
Address: 910 BEVILLE ROAD
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D () Delete
Name: GAINES, CHRISTOPHER
Address: 910 BEVILLE RD
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VPD () Delete
Name: TRIPLETT, JANETTE
Address: 910 BEVILLE ROAD
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VPDS (X) Delete
Name: TRIPLETT, JANELLE
Address: 910 BELLEVILLE RD
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: TRIPLETT, MARCUS J
Address: 920 BEVILLE ROAD
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VPDS (X) Change () Addition
Name: TRIPLETT, JANETTE K
Address: 932 PELICAN BAY DRIVE
City-St-Zip: DAYTONA BEACH, FL 32119

Title: D (X) Change () Addition
Name: GIORGIS, ADRIANO J
Address: 910 BEVILLE ROAD
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARCUS J. TRIPLETT

PD

04/18/2007

Electronic Signature of Signing Officer or Director

Date