

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 24, 1999 8:00 am
Secretary of State

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1. Corporation Name

ABUNDANT LIFE ACADEMY OF LEARNING, INC.

Principal Place of Business

910 BEVILLE RD.
DAYTONA BEACH FL 32114

Mailing Address

910 BEVILLE RD.
DAYTONA BEACH FL 32114



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

04/28/1997

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-3447221

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHNSON, STEPHANIE E
910 BEVILLE RD
DAYTONA BEACH FL 32114

81 Name STEPHEN E. JOHNSON

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

Same

83

84 City

Same

FL

85 Zip Code

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 BY:

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

STEPHEN E. JOHNSON, TREASURER

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME TRIPLETT, MARCUS
STREET ADDRESS 910 BEVILLE RD
CITY-ST-ZIP DAYTONA BEACH FL 32114

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

TITLE STD
NAME JOHNSON, STEPHANIE E
STREET ADDRESS 910 BEVILLE RD
CITY-ST-ZIP DAYTONA BEACH FL 32114

DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

JOHNSON, STEPHEN E.

TITLE D
NAME GOINS, CHRISTOPHER
STREET ADDRESS 910 BEVILLE RD
CITY-ST-ZIP DAYTONA BEACH FL 32114

DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

TITLE D
NAME SHARP, DAVID
STREET ADDRESS 910 BEVILLE RD
CITY-ST-ZIP DAYTONA BEACH FL 32114

DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

14. 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 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, with all other like empowered.

SIGNATURE BY:

SIGNATURE REQUIRED

JOHNSON, TREASURER 1/15/99 904 57-5433

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)