# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 08, 2004**
**Secretary of State**

DOCUMENT# N97000006925

**Entity Name:** ABUNDANT LIFE HARVEST INC.

**Current Principal Place of Business:**

SPRING FIELD ROAD
MONTICELLO, FL 32344

**New Principal Place of Business:**

**Current Mailing Address:**

1682 ST. AUGUSTINE ROAD
MONTICELLO, FL 32344

**New Mailing Address:**

**FEI Number: 59-3481749** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BAGGETT, EARL W
RT. 1 BOX 165-A
MONTICELLO, FL 32344 US

**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

Title: TD (X) Delete
Name: REGISTER, JACKIE
Address: 271 WAUKEENAH HWY.
City-St-Zip: MONTICELLO, FL 32344

Title: SD ( ) Delete
Name: COOKSEY, BERLENE
Address: 4023 W. CAPPS HWY.
City-St-Zip: MONTICELLO, FL 32344

Title: DV ( ) Delete
Name: BUZBEE, EVELYN H
Address: 1682 ST. AUGUSTINE ROAD
City-St-Zip: MONTICELLO, FL 32344

Title: DP ( ) Delete
Name: BAGGETT, EARL
Address: 210 FLAT WOODS ROAD
City-St-Zip: MONTICELLO, FL 32344

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: TD (X) Change ( ) Addition
Name: BUZBEE, EVELYN H
Address: 1682 ST. AUGUSTINE ROAD
City-St-Zip: MONTICELLO, FL 32344

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 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 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: EVELYN H. BUZBEE TD 04/08/2004

Electronic Signature of Signing Officer or Director — Date