NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

1999

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

21

DOCUMENT # N98000001211

ABUNDANT LIFE FELLOWSHIP OF THE PALM BEACHES, INC. .

Principal Place of Business

13 A CROSSINGS CIRCLE
BOYNTON BEACH, FL 33435

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

13 A CROSSINGS CIRCLE BOYNTON BEACH, FL 33435

FILED May 10, 1999 8:00 am Secretary of State

Applied For

\$8.75 Additional

Fee Required

Not Applicable

05-10-1999 90283 038 ****70.00

* 5 778750 8 90007 - 25 8 *

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3. Date Incorporated or Qualifed MARCH 2, 1998

5. Certificate of Status Desired

TERRANCE KEARNEY PRESIDENT/PASTOR 04/27/99 561 736-2291

4. FEI Number

65-0815991

23	<u> </u>	28							4		1
Zip	Country 25	Zip .	Country	1		Election Campaign Fire Trust Fund Contribution	- 11		\$5.00 May Be Added to Fees		
24	9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent							
	81										
ZEMODA VEDD MADE											
ZENORA KERR-WARD				82 Street Address (P.O. Box Number is Not Acceptable)							Ĺ
5725 CORPORATE WAY, SUITE 206											ı
WEST I	PALM BEACH, FL 33407		83								1
			84	City				FL	85 Zip (code	
44 Duestinet	to the provisions of Sections 617.0502	and 617 1508 Florida Statutes	the shove	named co	roczeti	on submits this statemen	t for the pu	mose of c	changing its	registered	ı
office or r	egistered agent, or both, in the State of	Florida. Such change was auth	torized by t	he corpora	ition's l	poard of directors. I here	by accept t	he appoin	itment as reg	gistered	
agent. I a	m familiar with, and accept the obligation	ons of, Section 617.0503, Florid	a Statutes.				4/2	nlac	,		ĺ
SIGNATURE	Senora Ken Wa	ud	egestered Agent	elonotive remi	arael subsec	n samustatana)	<u> 11×</u>	COMP			ء ا
12.	Signature, typed or printed name of registered agent a OFFICERS AND		13.	PIĞLIBION 1000		ADDITIONS/CHANGES	TO OFFIC	CERS AN	D DIRECTO	RS IN 12	(41/08)
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NAME	MILDRED SMITH			7		SHERWOOD GLE	עבעו זאי	#7			i
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NAME	TERRANCE KEARNEY	_	3.2 NAME								-
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indicated	entify that the information supplied with on this annual report or supplemental a	nnual report is true and accurat	e and that i	my signatu	ire sha	ll have the same legal en	ect as it ma	ade under	roatn; inai i	am an	
officer or o	director of the corocration or the receive	er or trustee empowered to exec	cute this rep	cort as req	uired b	y Chapter 617, Florida S	italules; an	d that my	name appe	ars in	
Block 12 c	or Block 13 if changed, or on an attachn	nent with an address, with all of	ner iike em	owered.							