## 2000 UNIFORM BUSINESS REPORT (UBR)

## Jun 13, 2000 08:00 AM DOCUMENT # N9800001211 1. Entity Name **Secretary of State** ABUNDANT LIFE FELLOWSHIP OF THE PALM BEACHES, INC. Principal Place of Business Mailing Address 13 A CROSSINGS CIR 13 A CROSSINGS CIR BOYNTON BEACH BOYNTON BEACH FL FL 33435 33435 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0815991 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KERR-WARD 5725 CORPORATE WAY STE. 206 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL33407 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. 06/13/2000 **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delate DT TITLE $\mathbf{DT}$ ☐ Addition NAME WARE JOHN. NAME WARE JOHN STREET ADDRESS 622 S. PINE STREET #2 STPEET ADDRESS 2104 N.E. 1ST COURT CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH $\mathbf{FL}$ 33460 BOYNTON BEACH FL33435 TITLE ☐ Delete DS ☐ Change ☐ Addition NAME BRADLEY BERNICE NAME STREET ADDRESS 2104 N.E. 1ST COURT STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH 33435 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME SUTTON RYAN STREET ADDRESS 6186 SHERWOOD GLEN WAY #7 STREET ADDRESS CITY-ST-ZIP CITY-ST-7iP WEST PALM BEACH FL 33415 TITLE DS ☐ Delete TITLE ☐ Change ☐ Addition NAME BUSH KEM STREET ADDRESS 5303 EADIE PL STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH 33407 CITY-ST-ZIP TITLE ☐ Delete DΡ TITLE Change ☐ Addition NAME TERRANCE KEARNEY NAR/F STREET ADDRESS 13 A CROSSINGS CIR STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH CITY-ST-ZIP FL. 33435 TITLE ☐ Delete TITLE Change | ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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CITY-ST-ZIP

<sup>12.</sup> 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 617, 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.