2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 05, 2000 8:00 am
Secretary of State
05-08-2000 90075 035 ****61.25

DOCUMENT # N99000004204

1. Entity Name

ABUNDANT LIFE IN CHRIST MINISTRIES, INC.

Principal Place of Business	Mailing Address
RT. 22 BOX 800 LAKE CITY FL 32024	RT. 22 BOX 800 LAKE CITY FL 32024-7413

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3587505 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MCMILLAN, ELAINE RT. 22 BOX 800 LAKE CITY FL 32024	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCMILLAN, ELAINE RT. 22 BOX 800 LAKE CITY FL 32024	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Chairman of the Board Mike Thompson D Rt. 13 Box 717 Lake City, Fl. 32055	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCMILLAN, CECIL RT. 22 BOX 800 LAKE CITY FL 32024	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sergeant of Arms Jerky Jones D Rt. 22 Box 800 Lake City, Fl. 32024	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STANLEY, EVELYN RT. 22 BOX 800 LAKE CITY FL 32024	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Assistant Secretary Kimbealy Peetee D Rt. 4 Box 2440 Lake City, Fl. 32024	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice. President Gloria Plummer D 615 W. Thompson #A-2 Lake City, Fl. 32055	☐ Delete ☑ Addition	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Assistant Sergeant of Arms William Skelton D Rt. 1 Box 649 White Springs, Fl. 32096	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary John McMillan Rt. 13 Box 708 Lake City, Fl. 32055	☐ Delete ☑ Addition	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice. President, Treasurer Clayton Stanley D Rt. 13 Box 708 Lake City, Fl. 32055	☐ Delete ☑ Addition	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

12. 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.

SIGNATURE: Elaine McMillan QUIT Elaine McMillan 4/26/00 (904) 752-6984
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #