

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000003989

FILED
Apr 13, 2004
Secretary of State

Entity Name: ALABASTER BOX CHRISTIAN BOOKS & GIFTS, INC.

Current Principal Place of Business:

740 W BURLEIGH BLVD
TAVARES, FL 32778

New Principal Place of Business:

Current Mailing Address:

740 W BURLEIGH BLVD
TAVARES, FL 32778

New Mailing Address:

FEI Number: 71-0928249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCANTS, RONALD
740 W BURLEIGH BLVD
TAVARES, FL 32778

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: FRAZIER, ANTHONY
Address: 12137 LAKESIDE LN
City-St-Zip: TAVARES, FL 32778

Title: D (X) Delete
Name: FRAZIER, MACHELLE
Address: 12137 LAKESIDE LN
City-St-Zip: TAVARES, FL 32778

Title: D () Delete
Name: MCCANTS, RONALD
Address: 3202 PAINTED POST CT
City-St-Zip: EUSTIS, FL 32726

Title: D () Delete
Name: MCCANTS, BARBARA
Address: 3202 PAINTED POST CT
City-St-Zip: EUSTIS, FL 32726

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D () Change (X) Addition
Name: MCCONNELL, STEPHANIE M
Address: 450 SHIRLEY RD
City-St-Zip: ROYSTON, GA 30662

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONALD MCCANTS

D

04/13/2004

Electronic Signature of Signing Officer or Director

_____ Date