2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744104

FILED Feb 02, 2009 Secretary of State

Entity Name: THE NEW JESUS HOUSE OF FAITH EVANGELISTIC MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

261 SW 27 AVE

FORT LAUDERDALE, FL 33311

Current Mailing Address: New Mailing Address:

P.O.BOX 120952

FT.LAUDERDALE, FL 33312

FEI Number: 65-0263316 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DRAKE, DEBORAH C CLAYTON, DEBORAH L 2401 NW 47TH AVE 2401 NW 47TH AVE

LAUDERHILLE, FL 33313 US LAUDERHILLE, FL 33313 US

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: DEBORAH L. CLAYTON 02/02/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 DRAKE, DEBORAH C
 Name:
 CLAYTON, DEBORAH L

 Address:
 2401 NW 47TH AVE
 Address:
 2401 NW 47TH AVE

 Address:
 2401 NW 47TH AVE
 Address:
 2401 NW 47TH AVE

 City-St-Zip:
 LAUDERHILL, FL 33313
 City-St-Zip:
 LAUDERHILL, FL 33313

Title: SD () Delete Title: SD (X) Change () Addition Name: HAMILTON, BETTY Name: NATALIE, MADRY

 Address:
 2141 NW 28 ST
 Address:
 4530 NW 36 ST, APT #409

 City-St-Zip:
 FT. LAUDERDALE, FL 33311
 City-St-Zip:
 LAUDERDALE LAKES, FL 33319

Title: D () Delete Title: TD (X) Change () Addition

 Name:
 MALONE, JAMES
 Name:
 MALONE, JAMES

 Address:
 249 NE 39 CT
 Address:
 249 NE 39 CT

City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: POMPANO BEACH, FL 33060

 $\label{eq:title:Title:D} {\sf Title:} \qquad {\sf D} \qquad (\) {\sf Change} \ ({\sf X}) \ {\sf Addition}$

 Name:
 Name:
 CYNTHIA, LEWIN

 Address:
 Address:
 1190 N.W. 20TH AVE

 City-St-Zip:
 City-St-Zip:
 LAUDERHILL, FL 33313

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DEBORAH L. CLAYTON MS. 02/02/2009