


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State

01-22-2007 90075 037 ****70.00

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1. Entity Name
 SHARING THE CHURCH OF JESUS CHRIST, INC.




Principal Place of Business
 2620 N.W. 19TH AVENUE
 OAKLAND PARK, FL 33310 US

Mailing Address
 3361 NW 8TH ST.
 FT. LAUDERDALE, FL 33311 US

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country



01172007 Chg-NP CR2E037 (12/06)

4. FEI Number
 59-2093706

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

CALDWELL, ROSA M.
 3361 N.W. 8TH STREET
 FT. LAUDERDALE, FL 33311

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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

Filing Fee is \$61.25 Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> Delete
NAME	BELL, BERTHA	
STREET ADDRESS	4421 S W 18TH STREET	
CITY-ST-ZIP	HOLLYWOOD, FL 33023	
TITLE	D	<input type="checkbox"/> Delete
NAME	MAPP, CARLTON L	
STREET ADDRESS	220 SW 29 TERRACE	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312	
TITLE	D	<input type="checkbox"/> Delete
NAME	CALDWELL, MARVIN	
STREET ADDRESS	3361 N W 8TH STREET	
CITY-ST-ZIP	FT LAUDERDALE, FL 33311	
TITLE	PD	<input type="checkbox"/> Delete
NAME	BELL, RONALD	
STREET ADDRESS	4421 SW 18TH ST	
CITY-ST-ZIP	HOLLYWOOD, FL 33023	
TITLE	TD	<input type="checkbox"/> Delete
NAME	CALDWELL, ROSA M	
STREET ADDRESS	3361 NW 8TH STREET	
CITY-ST-ZIP	FT LAUDERDALE, FL 33311	
TITLE	D	<input type="checkbox"/> Delete
NAME	MCGRUDER, CLIFTON	
STREET ADDRESS	1690 NW 9TH STREET	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33313	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NATASHA BELL	
STREET ADDRESS	4166 Inverrary Dr Unit 101	
CITY-ST-ZIP	Lauderhill, FL 33319	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Rosa M. Caldwell* ROSA M. CALDWELL 1/17/07 954-987-3263
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #